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ABSTRACT

This self-assessment and planning guide is designed to help schools evaluate their physical activity and nutrition policies and programs based on national standards and guidelines. It assists schools in identifying strengths and weaknesses of their health promotion policies and practices, developing action plans for improving student health, and involving teachers, parents, students, and the community in improving school services. The first section offers instructions for the site coordinator, which include: review the modules, assemble the school health index team, meet to discuss the index and assign tasks, complete each module, complete the overall score card, and meet to develop an action plan. The guide's eight modules present information on: (1) "School Policies and Environment"; (2) "Health Education"; (3) "Physical Education"; (4) "Nutrition Services"; (5) "School Health Services"; (6) "School Counseling, Psychological, and Social Services"; (7) "Health Promotion for Staff"; and (8) "Family and Community Involvement." Each module presents instructions for the coordinator, a questionnaire, planning questions, and worksheets. A list of resources is included. (SM)

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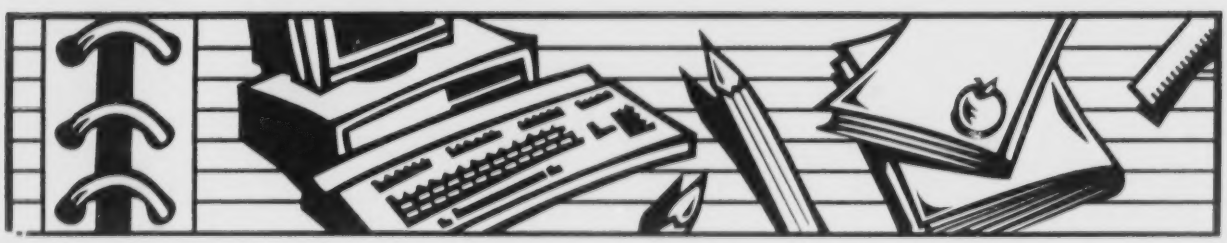
School Health Index

For Physical Activity and Healthy Eating



A Self-Assessment and Planning Guide

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Middle School/High School

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SP 040398

February 2000

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention

CDC
CENTERS FOR DISEASE CONTROL AND PREVENTION

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30341-3724

SUBJECT: School Health Index — Middle School/High School

Dear School Health Advocate:

Enclosed is a complimentary copy of the School Health Index for Physical Activity and Healthy Eating: A Self-Assessment and Planning Guide. This is a tool that can help your school assess its physical activity and nutrition policies and programs based on national standards and guidelines, and it can be used as a part of your School Improvement Plan. The Index was developed by the Centers for Disease Control and Prevention (CDC) in partnership with school health experts, school administrators and staff, parents, and national education and health organizations.

Look at what school administrators and staff are saying about the Index.

"It's a real energizer."

"The school staff had a very positive attitude toward the Index. They liked the comprehensive view of health promotion in the Index including the use of many different types of stakeholders."

"The School Health Index was easy to use and enabled us to clearly identify what is working and what needs to be improved."

"The Index has helped us take a new look at how we may be able to improve our physical activity and nutrition focus. Knowing that the CDC is sponsoring this program adds credibility to our results."

"The School Health Index can help every school become a center for a healthier, more physically fit community."

Please take a moment to review the School Health Index. As you will see, it's a simple, straightforward questionnaire that gives administrators, staff, parents, and students a chance to get involved and work together to create a healthier school. A small investment of time can pay big dividends in improved student health, well-being, and readiness to learn.

Additional copies of the Index and the promotional brochure can be obtained by any of the following options.

- Download from CDC web sites:
  http://www.cdc.gov/nccdphp/dash
  http://www.cdc.gov/nccdphp/dnpa
- Request by e-mail: ccdinfo@cdc.gov
- Call the Division of Adolescent and Achool Health Resource Room: (770)488-3168
- Request by toll-free fax: (888)282-7681

When ordering the Index, please specify either the elementary school version or the middle school/high school version.

Good luck in your efforts to improve the health of young people!

Sincerely,

William H. Dietz, M.D., Ph.D.
Director
Division of Nutrition and Physical Activity
Centers for Disease Control and Prevention

Lloyd J. Kolbe, Ph.D.
Director
Division of Adolescent and School Health
Centers for Disease Control and Prevention

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Planning for Improvement

Resources

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When ordering, please specify either the elementary school version or the middle school/high school version.

Use of trade names and commercial sources is for identification only and does not imply endorsement by the Public Health Service or the U.S. Department of Health and Human Services.

Funding for development of the School Health Index came from the CDC Foundation and Robert W. Woodruff Foundation.

School Health Index for Physical Activity and Healthy Eating:

A Self-Assessment and Planning Guide

Promoting healthy behaviors among students is an important part of the fundamental mission of schools: to provide young people with the knowledge and skills they need to become healthy and productive adults. Improving student health can:

- increase students' capacity to learn,
- reduce absenteeism, and
- improve physical fitness and mental alertness.

The School Health Index is a self-assessment and planning guide developed by the Centers for Disease Control and Prevention (CDC) that will enable you to:

- identify the strengths and weaknesses of your school's health promotion policies and programs,
- develop an action plan for improving student health, and
- involve teachers, parents, students, and the community in improving school services.

Focus on Physical Activity and Healthy Eating

The first version of the School Health Index addresses school activities related to physical activity and nutrition. Future versions will address all six of the behaviors that account for most of the serious illnesses and premature deaths in the United States (see box).

Healthy eating and regular physical activity help young people stay in shape, feel good, do their best at school, and avoid developing risk factors that can eventually lead to heart disease and cancer. Unfortunately, most young people don't meet physical activity and nutrition recommendations, and more children and adolescents are overweight than ever before (see Fact Sheet on page 2).

The Six Behaviors

Good school health programs need to address each of the following behaviors:

- Poor eating habits
- Physical inactivity
- Tobacco use
- Behaviors that result in intentional or unintentional injury
- Abuse of alcohol and other drugs
- Sexual behaviors that result in HIV infection, other sexually transmitted diseases, or unintended pregnancy

Big Dividends

The School Health Index is available at no cost and the assessment process can be completed in as little as five hours. Many of the improvements you'll want to make after completing the Index can be done with existing staff and few or no new resources. A small investment of time can pay big dividends in improved student health, well-being, and readiness to learn.

Physical Activity and Nutrition Fact Sheet

Food Intake and Academic Performance

- Research suggests that not having breakfast can affect children's intellectual performance. Participation in the School Breakfast Program can improve students' test scores and reduce their rates of absence and tardiness.
- Children from families that report multiple experiences of food insufficiency and hunger are more likely to show behavioral problems (such as hyperactivity and aggression), emotional problems (such as anxiety), and academic problems (such as absences and tardiness), compared to children from the same low-income communities whose families did not report experiences of hunger.

Eating Habits, Physical Activity, and Disease

- Poor eating habits and physical inactivity together account for at least 300,000 deaths among U.S. adults; only tobacco use contributes to more deaths.
- Poor eating habits and physical inactivity are known risk factors for heart disease, cancer, stroke, diabetes, high blood pressure, and osteoporosis.

Overweight and Obesity

- The percentage of children and adolescents who are overweight has almost doubled since 1980.
- About 11% of children and adolescents are now overweight.

Percentage of Children and Adolescents (Aged 6–17) Who Meet Specific Dietary Recommendations*

Recommendation	% Meeting Recommendation
Fat (≤30% of calories)	36%
Saturated fat (<10% of calories)	32%
Fruits & vegetables (≥5 servings/day excluding fried potatoes and chips)	18%

*Unpublished CDC analysis of U.S. Department of Agriculture Continuing Survey of Food Intakes by Individuals, 1994-96.

Benefits of Regular Physical Activity

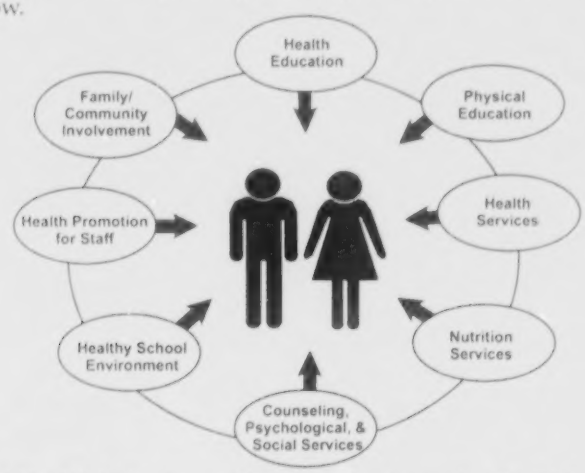
- Helps build and maintain healthy bones and muscles.
- Helps control weight, build lean muscle, and reduce fat.
- Reduces feelings of depression and anxiety and promotes psychological well-being.

Youth Participation in Physical Activity

- Nearly half of 12-to 21-year olds do not engage in vigorous physical activity on a regular basis.
- The percentage of high school students participating in daily physical education classes dropped from 42% in 1991 to 27% in 1997.
- Only 49% of high school students were enrolled in a physical education class in 1997.

Instructions for Site Coordinator

1. **Review the eight modules.** The physical activity and eating habits of students are influenced by the entire school environment, not just the cafeteria and gymnasium. Therefore, the School Health Index has eight different modules, each corresponding to the eight components of a coordinated school health program shown below.



2. **Assemble the School Health Index team.** Your first step towards a healthier school is to identify a team of people who will be responsible for completing the School Health Index. You may choose to use an existing team, such as the School Health Committee, or create a new team. You may want to have the entire team work together to complete all eight modules, or you may want to subdivide the group and have smaller teams complete each module. In either case, broad participation is important for meaningful assessment and successful planning and implementation.

   Below are suggestions about key people whom you may want to invite to help complete each module and plan for improvement. Choose team members who you think are appropriate to represent your school and community.

Module 1: School Policies and Environment
- Principal
- Assistant principal
- Physical education teacher
- School food service manager
- Teacher(s)
- Parent(s)
- Student(s)
- Community health agency representative(s) (e.g., American Cancer Society)

Module 2: Health Education
- Health education teacher
- Physical eduction teacher
- Teacher(s)
- School food service staff member
- School nurse
- Parent(s)
- Student(s)

Module 3: Physical Education
- Physical education teacher
- Teacher(s)
- Coach(es)
- Parent(s)
- Student(s)

Module 4: Nutrition Services
- School food service manager
- School food service staff member(s)
- Health education teacher
- Teacher(s)
- Parent(s)
- Student(s)

Module 5: School Health Services
- School nurse
- Parent(s)
- Student(s)
- Community-based health care provider

Module 6: School Counseling, Psychological, and Social Services
- School counselor
- School psychologist
- School social worker
- Parent(s)
- Student(s)
- Community-based social services provider

Module 7: Health Promotion for Staff
- Physical education teacher
- School nurse
- Teacher(s)
- Community health agency representative(s) (e.g., American Cancer Society)

Module 8: Family and Community Involvement
- Parent(s)
- Student(s)
- Teacher(s)
- School nurse
- Community health agency representative(s) (e.g., American Cancer Society)

3. **Meet to discuss the Index and assign tasks.** At the first meeting, explain the School Health Index (pages 5-10 are overheads for this purpose). Decide who will be working on which modules, and set a timeline for completion of the modules. When assigning responsibility for the modules, try not to overburden any individuals with too many assignments, but try to have more than one person working on each module. Working as a team will increase the accuracy of responses and tap into creative insights for improving school services. Make sure that everyone gets a copy of the Instructions, Score Card, and Questionnaire for their assigned module(s).

4. **Complete each module.** Each module team should answer the questions by getting any needed information and having an open discussion. Each question gives directions on how to select from the four scoring choices. Answers should be written on a copy of the Score Card. The team completing the module should then use these results to answer the Planning Questions at the end of the module. Some modules can be answered in minutes, but others might take an hour or more to complete.

5. **Complete the Overall Score Card** (located in the Planning for Improvement section). Collect each module Score Card and copy the results onto the Overall Score Card.

6. **Meet to develop an action plan.** Give a copy of the Overall Score Card to each team member. Review the results and give each module team an opportunity to present its recommendations for action as identified by the Planning Questions. Work together to decide the top priorities for each module and for the entire school.

Tips for Completing the School Health Index

Accuracy counts. Please answer all questions as accurately as possible. The School Health Index is your school-based self-assessment and planning tool; it is not an instrument for auditing or punishing school staff.

The focus is on health promotion. The School Health Index was designed to assess implementation of health promotion activities across each of the eight school health components. It does not address basic administrative duties, such as bookkeeping.

There is no passing grade. The School Health Index is not intended to be used to compare one school with another. You should only use your Index scores to help you understand your school's strengths and weaknesses and to develop an action plan for improving your health promotion efforts. It is realistic to expect low scores in certain areas; low scores can help you build awareness of areas needing improvment.

Some actions are easier than others. Use of the School Health Index tool might lead your team to recommend actions that require additional resources. You might find, however, that many of the recommended actions involve simply making better use of existing resources.

Keep the team together. The purpose of completing the School Health Index is to start on a path to improve your school's services. Once you have started, you can keep the team together and use the Index to monitor your progress. Establish a schedule for annual assessments, so that the Index can serve as a tool for continuous improvement and accountability over time.

School Health Index for Physical Activity and Healthy Eating:

A Self-Assessment and Planning Guide

The School Health Index will help schools to:

- Identify the strengths and weaknesses of their health promotion policies and programs.
- Develop an action plan for improving student health.
- Involve teachers, parents, students, and the community to improve school services.

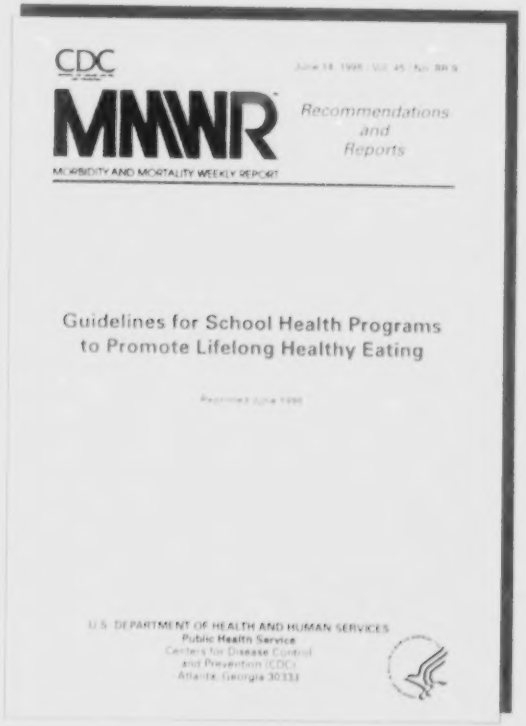
Why should schools promote physical activity and healthy eating?

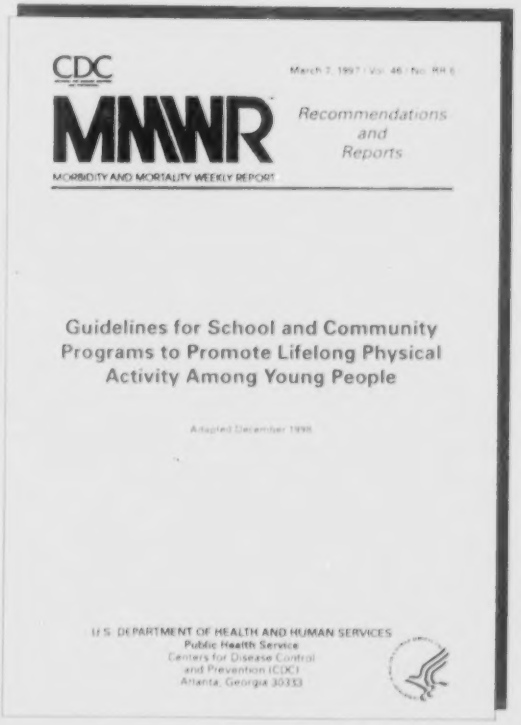
- As a society, we value good health.
- Good health is necessary for effective learning.
- Healthy students become healthy, productive citizens.
- Disease prevention is more cost-effective than treatment.
- The school system is the one place where most of our nation's youth can be addressed.

Why focus on physical activity and healthy eating?

- Physical inactivity and poor diet are strongly related to heart disease, cancer, obesity, and diabetes.
- Almost all schools provide physical activity and nutrition services for students.
- An appropriate diet can positively impact problem-solving skills, test scores, and school attendance rates.
- Physical activity can reduce anxiety and stress and increase self-esteem.

The Index helps schools compare their practices to CDC Guidelines


CDC
MMWR
Recommendations and Reports
MORBIDITY AND MORTALITY WEEKLY REPORT
Guidelines for School Health Programs to Promote Lifelong Healthy Eating
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Centers for Disease Control and Prevention (CDC)
Atlanta, Georgia 30333


CDC
MMWR
Recommendations and Reports
MORBIDITY AND MORTALITY WEEKLY REPORT
Guidelines for School and Community Programs to Promote Lifelong Physical Activity Among Young People
Adopted December 1996
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Centers for Disease Control and Prevention (CDC)
Atlanta, Georgia 30333

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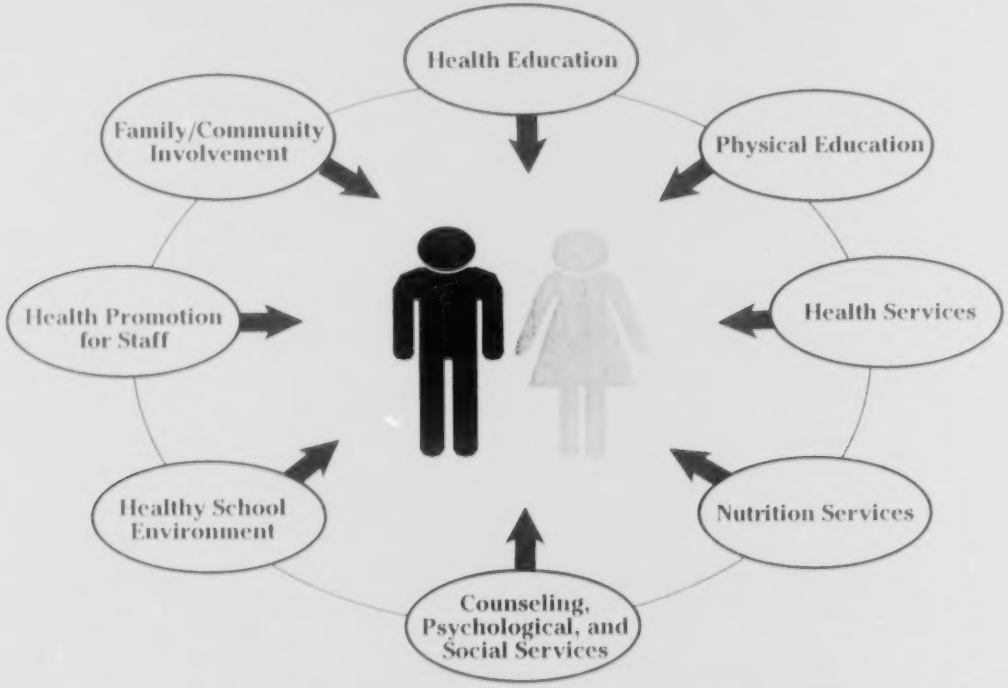
The Index modules are based on the CDC Coordinated School Health Program model



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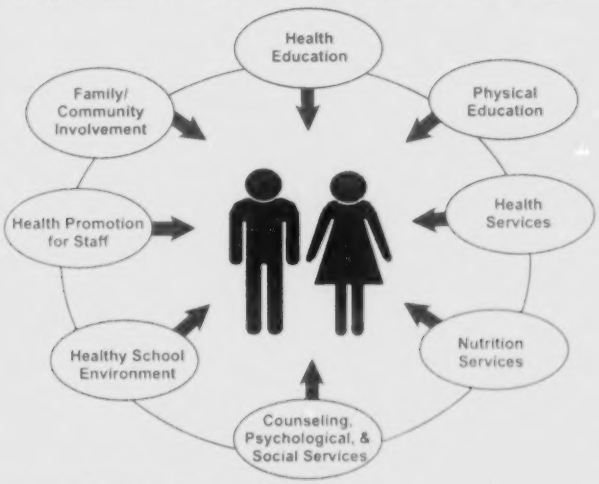
Module 1: School Policies and Environment

Instructions for Module Coordinator

Physical activity and eating behaviors are influenced by the entire school environment, not just the cafeteria and gymnasium. That's why the School Health Index has eight different modules, corresponding to the eight components of a coordinated school health program shown below.



Instructions for completing the module

1. Organize a team to complete the module. Below are some suggested team members for this module. Choose team members who you think are appropriate to represent your school and community.

   Principal
   Assistant Principal
   Physical education teacher
   School food service manager
   Teacher(s)
   Parent(s)
   Student(s)
   Community health agency representative(s) (e.g., American Cancer Society, public health department)

2. Provide each team member with a copy of the Questionnaire.
3. Photocopy the Score Card and Planning Questions before writing on them, as they are master copies designed for repeated use.
4. As a team, discuss each question and its scoring descriptions, seek out any information needed to accurately answer each question, arrive at a consensus on a score for each question, and record scores on the Score Card. (Answer each question as accurately as possible. The Index is **your** self-assessment tool for identifying strengths and weaknesses and for planning improvements.)

   Note: Testing of the School Health Index has shown that it takes approximately 1 hour to complete each of modules 1-4, and approximately 30 minutes to complete each of modules 5-8. This may not include time that it takes to seek out needed information.
5. Total the scores at the bottom of the Score Card.
6. As a team, based on the scores awarded, answer the three Planning Questions located at the end of the module. (The answers to these questions will serve as the basis for a meeting of all who completed Index modules to discuss overall results and plan improvements. Be prepared to discuss your findings and recommendations.

Good luck in your efforts to improve the health of young people!

Module 1: School Policies and Environment

Score Card (photocopy before using)

Instructions: To complete this Score Card, first carefully read and discuss the Questionnaire on the following pages which contains specific questions and scoring descriptions. After all questions have been scored, respond to the Planning Questions at the end of the module.

		Fully In Place	Partially In Place	Under Development	No
1.1	Representative committee oversees school health programs	3	2	1	0
1.2	Written policies on physical activity	3	2	1	0
1.3	Physical activity facilities	3	2	1	0
1.4	Student access to physical activity facilities outside of school hours	3	2	1	0
1.5	Prohibit use of physical activity as punishment	3	2	1	0
1.6	Written policies on nutrition	3	2	1	0
1.7	Prohibit access to foods of low nutritive value	3	2	1	0
1.8	Fund-raising efforts support healthy eating	3	2	1	0
1.9	Time to eat school meals	3	2	1	0
1.10	Prohibit use of food as a reward or punishment	3	2	1	0
1.11	Staff oriented to policies	3	2	1	0

Total the number of circled responses in each column				
Multiply by the point value	x 3	x 2	x 1	x 0
Subtotals	+	+	+	0
Total points earned				
Total points possible	33			
Percentage (total points earned/33) x 100	%			

Module 1: School Policies and Environment
Questionnaire

1.1 Representative committee oversees school health programs

Does the school have a representative committee that meets at least twice a year to oversee school health programs, including physical activity and nutrition programs?

"Representative" means that it includes relevant members of the school community, such as parents, students, teachers, administrators, food service staff, coaches, and counselors.

3 = **Yes**.
2 = There **is a committee, but** it is not representative,
or it meets less than twice a year,
or it does not address physical activity and nutrition programs.
1 = There is **no committee**, but there are **plans to form one**.
0 = **No**.

1.2 Written policies on physical activity

Does the school or district have written policies on physical activity that commit the school to the following?

- ✔ *providing daily physical education for all students in all grades*
- ✔ *hiring certified physical education teachers*
- ✔ *providing physical education and extracurricular programs that meet the needs and interests of all students, including those with special health care needs*
- ✔ *providing a broad range of competitive and noncompetitive physical activities that help to develop the skills needed to participate in lifetime physical activities*

Examples of "special health care needs" include learning disabilities, developmental disabilities, behavioral disorders, physical disabilities, temporary physical limitations, and medical conditions such as diabetes, asthma, and scoliosis.

"Lifetime physical activities" are those readily carried into adulthood because they generally involve only one or two people. Examples include swimming, bicycling, walking, running, racquet sports, and dancing.

3 = **Yes,** for all **four** areas listed above.
2 = For **three** areas.
1 = For **one or two** areas.
0 = **No**.

1.3 Physical activity facilities

Are the physical activity facilities adequate in the following ways?

- ✓ *both indoor and outdoor facilities are available for use by the physical education and extracurricular physical activity programs*
- ✓ *physical education classes do not have to be canceled due to weather extremes (rain, high or low temperatures, etc.)*
- ✓ *in physical education classes, all students can be physically active without overcrowding or safety risks*
- ✓ *for extracurricular activities, all interested students can sign up and participate without overcrowding or safety risks*

3 = **Yes**, for all **four** ways described above.
2 = For **three** ways.
1 = For **one or two** ways.
0 = **No**.

1.4 Student access to physical activity facilities outside of school hours

Can all students use the school's indoor and outdoor physical activity facilities outside of school hours?

"Outside of school hours" means after school, evenings, weekends, and school vacations.

3 = **Yes**.
2 = Indoor **or** outdoor facilities are available, but not both.
1 = Indoor **or** outdoor facilities are available, **but** the hours of availability are very limited.
0 = **No**.

1.5 Prohibit use of physical activity as punishment

Does the school prohibit the use of physical activity and withholding of physical education class as punishment? Is this prohibition clearly communicated to staff and consistently followed?

An example of "use of physical activity" is making students run laps or do push-ups as a consequence of inappropriate behavior.

"Withholding of physical education" means not allowing students to attend all or part of physical education class as a consequence of inappropriate behavior in another class or because they did not complete an assignment in another class. It does not refer to the physical education teacher disciplining students during physical education class by having them sit out for a period of time.

3 = **Yes**.
2 = **Both** the use of physical activity and the withholding of physical education as punishment are prohibited, **but** the prohibition is not clearly communicated **or** not consistently followed.
1 = **One** practice is prohibited, but not the other.
0 = **Neither** practice is prohibited.

1.6 Written policies on nutrition

Does the school or district have written policies on nutrition that commit the school to the following?

- ✔ *serve and actively promote healthy school meals*
- ✔ *provide free and reduced-price breakfast and lunch for qualified students*
- ✔ *make foods available that are low in fat, sodium, and added sugars wherever food is served inside and outside the cafeteria*
- ✔ *meet the nutritional needs of students with special health care needs*
- ✔ *provide adequate time for classroom nutrition education*

"Healthy school meals" are those that meet at minimum the U.S. Department of Agriculture's School Meal Nutrition Standards.

Examples of "wherever food is served outside the cafeteria" include classroom parties, special events, after-school programs, vending machines, school stores, snack bars/concession stands, staff meetings, parents' association meetings, and extended day programs (i.e., school-site day care for students before and/or after regular school hours).

To "meet the nutritional needs of students with special health care needs" means making necessary food modifications related to health status (e.g., diabetes, food allergies, physical disabilities). Food modifications may also be based on accommodating religious beliefs.

3 = **Yes,** for all **five** areas listed above.
2 = For **three or four** areas.
1 = For **one or two** areas.
0 = **No.**

School Meal Nutrition Standards

All school meals, as part of the U.S.D.A. National School Lunch Program and the School Breakfast Program, must meet the statutory and regulatory nutrition standards defined below:

1. Providing one-third (lunch) and one-fourth (breakfast) of the Recommended Dietary Allowances (RDA) for protein, calcium, iron, vitamin A and vitamin C for the applicable age or grade groups.
2. Providing one-third of lunchtime energy allowances (calories) and one-fourth of the breakfast energy allowances for children based on the applicable age or grade groups.
3. The applicable recommendations of the *1995 Dietary Guidelines for Americans:*
   - ✔ eat a variety of foods;
   - ✔ limit total fat to 30% of calories;
   - ✔ limit saturated fat to less than 10% of calories;
   - ✔ choose a diet low in cholesterol;
   - ✔ choose a diet with plenty of grain products, vegetables, and fruits;
   - ✔ choose a diet moderate in salt and sodium; and
   - ✔ choose a diet moderate in sugars.

Code of Federal Regulations, Title 7, Volume 4, Parts 210.10(b)(c)(d) and 220.8 (a)(b)(c).

1.7 Prohibit access to foods of low nutritive value

Does the school prohibit the sale and distribution of foods of minimal nutritional value and other foods of low nutritive value throughout the school grounds until after the end of the last lunch period?

"Foods of minimal nutritional value" are those, defined by the USDA regulations, that provide less than 5% of the U.S. recommended daily allowance per serving for protein, vitamin A, vitamin C, niacin, riboflavin, thiamin, clacium, and iron. They include carbonated soft drinks, chewing gum, water ices, and certain candies made predominantly from sweeteners, such as hard candy, licorice, jelly beans, and gum drops. U.S. Department of Agriculture regulations prohibit the sale of these foods in food service areas during meal times.

"Other foods of low nutritive value" provide most calories in the form of fat and/or sugars but contain few vitamins or minerals. Examples include candy, chips, juice drinks, and ades.

3 = **Yes.**

2 = The school prohibits the sale and distribution of foods of minimal nutritional value **and** other foods of low nutritive value **throughout the school grounds** during **meal service hours**.

1 = The school prohibits the sale and distribution of foods of minimal nutritional value **throughout the school grounds** during **meal service hours**.

0 = The school meets the USDA regulation by prohibiting the sale of foods of minimal nutritional value **in the food service area** during **meal service hours**.

1.8 Fund-raising efforts support healthy eating

Do school fund-raising efforts support healthy eating through the sale of non-food items or foods that are low in fat, sodium, and added sugars (e.g., fruits, vegetables, pretzels, or air-popped popcorn) instead of foods that are high in fat, sodium, and added sugars (e.g., candy)?

3 = **Yes**, fund-raising efforts **never include** the sale of foods high in fat, sodium, and added sugars.

2 = Fund-raising efforts **rarely include** the sale of these foods.

1 = Fund-raising efforts **typically include** the sale of these foods, but there are **plans to change** this.

0 = Fund-raising efforts **typically include** the sale of these foods.

1.9 Time to eat school meals

Do students have at least 10 minutes to eat breakfast and at least 20 minutes to eat lunch, counting from the time they are seated?

3 = **Yes**. (Note: If the school does not have a breakfast program, but does provide at least 20 minutes for lunch, you can select 3.)

2 = Adequate time for breakfast **or** lunch, but not both.

1 = **No**, but there are **plans to increase the time.**

0 = **No**.

1.10 Prohibit use of food as a reward or punishment

Does the school prohibit giving students low nutritive food as a reward and withholding food as punishment? Are these practices clearly communicated to staff and consistently followed?

"Low nutritive" foods provide calories primarily in the form of fat and/or sugars but contain few vitamins or minerals. Examples include candy, chips, and soft drinks.

An example of "food as a reward" is providing candy or fast-food coupons to students because they have behaved well or met an academic or fund-raising goal.

An example of "withholding food" is not allowing a snack or meal to one student that is offered to all others as a consequence of inappropriate behavior.

3 = **Yes**.

2 = The school **prohibits** the use of low nutritive food as a reward ***or*** withholding food as punishment, but not both;
or the school **prohibits** one or both of these practices, **but** the prohibition is not clearly communicated and/or not consistently followed.

1 = **No**, but there are **plans to prohibit** one or both of these practices.

0 = **No**.

1.11 Staff oriented to policies

Are staff oriented to, and given copies of, the physical activity and nutrition policies that relate to their job responsibilities?

3 = **Yes**.

2 = Oriented to **or** given copies, but not both.

1 = **No**, but there are **plans to do so**.

0 = **No**.

Module 1: School Policies and Environment

Planning Questions (photocopy before using)

These Planning Questions will help your school use its Index results to identify and prioritize changes needed to improve your physical activity and nutrition programs. Answers should be reviewed when completing the Planning for Improvement section of the Index.

1. Based on the scores earned for each question, what are the strengths and weaknesses of your school's physical activity and nutrition policies and environment?

2. To improve each of the weaknesses identified in question 1, identify recommendations for action.

3. Rate each of the recommendations identified in question 2 on the following five aspects: importance, cost, time, commitment, and feasibility. Rate each aspect on a scale of 1 to 5 using the chart below.

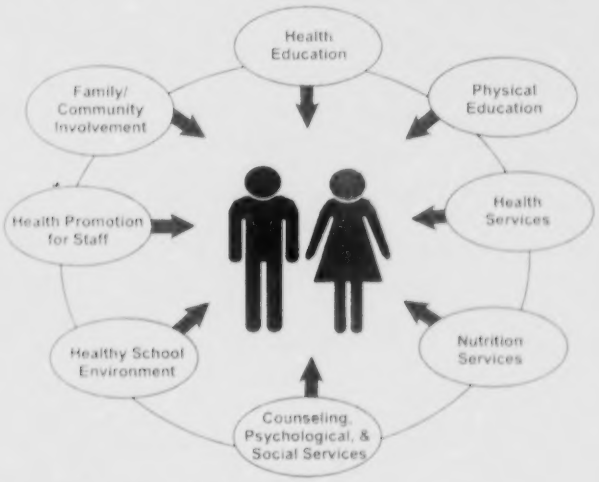
Importance	**How important is the recommendation?** 5 = Very important 3 = Somewhat important 1 = Not very important
Cost	**How expensive would it be to plan and implement the recommendation?** 5 = Not very expensive 3 = Moderately expensive 1 = Very expensive
Time	**How much time and effort would be needed to implement the recommendation?** 5 = Modest time and effort 3 = Somewhat high time and effort 1 = Very high time and effort
Commitment	**How enthusiastic would the school community be about implementing the recommendation?** 5 = Very enthusiastic 3 = Somewhat enthusiastic 1 = Not enthusiastic
Feasibility	**How attainable is the recommendation?** 5 = Fairly easy to attain 3 = Somewhat difficult to attain 1 = Very difficult to attain

Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points

Module 2: Health Education

Instructions for Module Coordinator

Physical activity and eating behaviors are influenced by the entire school environment, not just the cafeteria and gymnasium. That's why the School Health Index has eight different modules, corresponding to the eight components of a coordinated school health program shown below.



Instructions for completing the module

1. Organize a team to complete the module. Below are some suggested team members for this module. Choose team members who you think are appropriate to represent your school and community.

   Health education teacher
   Physical education teacher
   Teacher(s)
   School food service staff member
   School nurse
   Parent(s)
   Student(s)

2. Provide each team member with a copy of the Questionnaire.
3. Photocopy the Score Card and Planning Questions before writing on them, as they are master copies designed for repeated use.
4. As a team, discuss each question and its scoring descriptions, seek out any information needed to accurately answer each question, arrive at a consensus on a score for each question, and record scores on the Score Card. (Answer each question as accurately as possible. The Index is **your** self-assessment tool for identifying strengths and weaknesses and for planning improvements.)

   Note: Testing of the School Health Index has shown that it takes approximately 1 hour to complete each of modules 1-4, and approximately 30 minutes to complete each of modules 5-8. This may not include time that it takes to seek out needed information.
5. Total the scores at the bottom of the Score Card.
6. As a team, based on the scores awarded, answer the three Planning Questions located at the end of the module. (The answers to these questions will serve as the basis for a meeting of all who completed Index modules to discuss overall results and plan improvements. Be prepared to discuss your findings and recommendations.)

Good luck in your efforts to improve the health of young people!

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Module 2: Health Education

Score Card (photocopy before using)

Instructions: To complete this Score Card, first carefully read and discuss the Questionnaire on the following pages which contains specific questions and scoring descriptions. After all questions have been scored, respond to the Planning Questions at the end of the module.

		Fully In Place	Partially In Place	Under Development	No
2.1	Required health education course	3	2	1	0
2.2	Sequential health education curriculum	3	2	1	0
2.3	Curriculum consistent with standards	3	2	1	0
2.4	Health education grades	3	2	1	0
2.5	Essential physical activity topics	3	2	1	0
2.6	Essential nutrition topics	3	2	1	0
2.7	Active learning strategies	3	2	1	0
2.8	Opportunities to practice skills	3	2	1	0
2.9	Culturally appropriate examples and activities	3	2	1	0
2.10	Assignments encourage student interaction with family and community	3	2	1	0
2.11	Certified health education teachers	3	2	1	0
2.12	Continuing education for teachers	3	2	1	0

Total the number of circled responses in each column				
Multiply by the point value	x 3	x 2	x 1	x 0
Subtotals	+	+	+	0
Total points earned				
Total points possible				36
Percentage (total points earned/36) x 100				%

Module 2: Health Education

Questionnaire

2.1 Required health education course

Does the school require all students to take and pass at least one health education course?

Note: If your school has more than four grade levels (e.g., grades 7-12), answer this question instead: "Does the school require all students to take and pass at least two health education courses?," and for answer response 2 below, replace the word "one" with the word "two."

3 = **Yes**.

2 = Students are **required to take** one course, **but** they do not have to take it again if they fail it.

1 = **No**, but there are **plans to require** this.

0 = **No**.

2.2 Sequential health education curriculum

Do all who teach health education use a sequential health education curriculum that addresses physical activity and nutrition?

Examples of "all who teach" are health education teachers, classroom teachers, physical education teachers, or school nurses.

"Sequential" means a curriculum that builds on concepts taught in preceding years.

3 = **Yes**.

2 = **Some** do, and there are **plans to require all** to do so.

1 = **Some** do, but there are **no plans to require all** to do so.

0 = **None do,**
or the curriculum is not sequential,
or it does not include physical activity and/or nutrition,
or there is no health education curriculum.

2.3 Curriculum consistent with standards

Is the health education curriculum consistent with both the state standards for health education and the National Health Education Standards?

"Consistent" means that the curriculum addresses the key learning objectives identified by the standards.

3 = **Yes.** (Note: If your state does not have state standards, but the curriculum is consistent with national standards, select 3.)

2 = It's consistent with **either** state **or** national standards, but not both.

1 = **No**, but there are **plans to make it consistent** with standards.

0 = **No**,
or there is no health education curriculum.

National Health Education Standards

1. Students will comprehend concepts related to health promotion and disease prevention.
2. Students will demonstrate the ability to access valid information and health-promoting products and services.
3. Students will demonstrate the ability to practice health-enhancing behaviors and reduce health risks.
4. Students will analyze the influence of culture, media, technology, and other factors on health.
5. Students will demonstrate the ability to use interpersonal communication skills to enhance health.
6. Students will demonstrate the ability to use goal-setting and decision-making skills to enhance health.
7. Students will demonstrate the ability to advocate for personal, family, and community health.

Joint Committee on National Health Education Standards. *National Health Education Standards: Achieving Health Literacy.* Atlanta: American Cancer Society, 1995.

2.4 Health education grades

Do students earn grades for required health education courses? Do the grades count as much as grades for other subjects toward academic recognition (e.g., honor roll, class rank)?

3 = **Yes.** (Note: If the school does not give academic recognition, but does give a grade, you can select 3.)

2 = Students **earn grades, but** they count less than grades for other subjects.

1 = **No**, but there are **plans to change** this.

0 = **No**,
or there are no required health education courses.

2.5 Essential physical activity topics

Does the health education curriculum address all of these essential physical activity topics?

- ✔ *benefits of physical activity (including physiological, psychological, and social benefits)*
- ✔ *components of health-related fitness (including cardiovascular endurance, muscular endurance, muscular strength, flexibility, and body composition)*
- ✔ *phases of a workout (including warm up, workout, and cool down)*
- ✔ *opportunities for physical activity at school and in the community*
- ✔ *preventing injury during physical activity*
- ✔ *basic first aid (including preventing the spread of blood-borne pathogens)*
- ✔ *weather-related safety measures (such as avoiding heat stroke and hypothermia)*
- ✔ *data on illnesses related to a sedentary lifestyle*
- ✔ *influence of families on physical activity*
- ✔ *influence of the culture and media on physical activity*
- ✔ *how to find valid information or services related to physical activity and fitness*
- ✔ *communication skills to encourage physical activity*
- ✔ *decision-making skills for physical activity*
- ✔ *goal-setting skills for physical activity*
- ✔ *how students can influence or support others to engage in physical activity*
- ✔ *planning a personal physical activity program*
- ✔ *risks of using performance-enhancing drugs*

3 = **Yes.**

2 = **Most** of the topics.

1 = **Few or none** of the topics, but there are **plans to address more.**

0 = **Few or none** of the topics,
or there is no health education curriculum.

2.6 Essential nutrition topics

Does the health education curriculum address all of these essential nutrition topics?

- ✔ *benefits of healthy eating*
- ✔ *the Food Guide Pyramid*
- ✔ *using food labels*
- ✔ *identifying foods that are high in vitamins and minerals*
- ✔ *identifying foods that are low in fat, saturated fat, cholesterol, sodium, and added sugars*
- ✔ *eating plenty of fruits, vegetables, and grains*
- ✔ *eating plenty of calcium-rich foods*
- ✔ *food safety (including hand washing, food purchasing, preparation, and storage)*
- ✔ *preparing meals and snacks that are low in fat, sodium, and added sugars*
- ✔ *balancing food intake and physical activity*
- ✔ *accepting body size differences*
- ✔ *data on illnesses related to poor nutrition or unhealthy dietary behavior*
- ✔ *influence of families on dietary behavior*
- ✔ *influence of the culture and media on dietary behavior*
- ✔ *how to find valid information and services related to nutrition and dietary behavior*
- ✔ *communication skills for healthy eating*
- ✔ *decision-making skills for healthy eating*
- ✔ *goal-setting skills for healthy eating*
- ✔ *how students can influence or support others to engage in healthy dietary behaviors*
- ✔ *the Dietary Guidelines for Americans*
- ✔ *healthy weight control and risks of unhealthy weight control practices (such as crash diets and purging)*
- ✔ *eating disorders*

3 = **Yes**.

2 = **Most** of the topics.

1 = **Few or none** of the topics, but there are **plans to address more**.

0 = **Few or none** of the topics,
or there is no health education curriculum.

2.7 Active learning strategies

Do most or all physical activity and nutrition lessons feature active learning strategies and activities that students find to be enjoyable and personally relevant?

"Active learning" means activities that involve student participation, rather than lecture format.

3 = **Yes.**

2 = **About half** do.

1 = **Few or none** do, but there are **plans to use more** active learning strategies and activities.

0 = **Few or none** do.

2.8 Opportunities to practice skills

Do most or all physical activity and nutrition lessons teach the skills needed to adopt healthy behaviors, and do these lessons give students opportunities to practice these skills rather than learn only facts?

Examples of "skills needed to adopt healthy behaviors" include:

- reading food labels,
- identifying foods on a restaurant menu that are low in saturated fat, cholesterol, and sodium,
- planning meals,
- gardening,
- monitoring one's own physical activity and eating behaviors,
- preventing injury during physical activity, and
- developing a safe, individualized physical activity plan.

3 = **Yes.**
2 = **About half** do.
1 = **Few or none** do, but there are **plans to do more** of this.
0 = **Few or none** do.

2.9 Culturally appropriate examples and activities

Do all who teach health education use a variety of culturally appropriate examples and activities that are inclusive of the ethnic cultures of the community?

"Culturally appropriate examples and activities:"

- feature people of various ethnic/racial backgrounds,
- highlight the contributions and skills of people from a variety of cultural, racial, and ethnic groups,
- do not stigmatize or stereotype any groups,
- validate and build the student's self-esteem and sense of culture and national background, and
- reflect an acknowledgment of, and excitement about, student diversity.

3 = **Yes.**
2 = **Most** do.
1 = **Few or none** do, but there are **plans to increase this.**
0 = **Few or none** do.

2.10 Assignments encourage student interaction with family and community

Do all who teach health education use assignments and projects that encourage students to interact with family members and community organizations?

Examples of ways to "interact with family members" include:

- doing homework assignments with parents, guardian, or other family members,
- conducting surveys of family members,
- sharing information with family members,
- exhibiting student projects at school for family viewing, and
- participating in fun physical activity and nutrition-related family activities.

Examples of ways to "interact with community organizations" include:

- gathering information about existing community-based services,
- having students volunteer to help deliver services through community-based organizations, and
- participating in community-based special events.

3 = **Yes.**

2 = Assignments and projects encourage interaction with family **or** community, but not both.

1 = **No,** but there are **plans to add** these types of assignments and projects.

0 = **No.**

2.11 Certified health education teachers

Are all health education courses taught by certified health education teachers?

"Certified" means those teachers who have been awarded a credential by the state permitting them to teach health education.

3 = **Yes.**

2 = **Most** courses are taught by a certified health education teacher.

1 = **Few** courses are taught by a certified health education teacher.

0 = **No** courses are taught by certified health education teachers.

2.12 Continuing education for teachers

Do most or all who teach health education participate in professional development/continuing education in health education at least once a year?

"Professional development/continuing education" means on-site (e.g., school, district) and off-site (e.g., city, state, national) training opportunities.

3 = **Yes.**

2 = **About half** do.

1 = **Few or none** do, but there are **plans for more to participate.**

0 = **Few or none** do.

Module 2: Health Education

Planning Questions (photocopy before using)

These Planning Questions will help your school use its Index results to identify and prioritize changes needed to improve your physical activity and nutrition programs. Answers should be reviewed when completing the Planning for Improvement section of the Index.

1. Based on the scores earned for each question, what are the strengths and weaknesses of your school's health education program?

2. To improve each of the weaknesses identified in question 1, identify recommendations for action.

3. Rate each of the recommendations identified in question 2 on the following five aspects: importance, cost, time, commitment, and feasibility. Rate each aspect on a scale of 1 to 5 using the chart below.

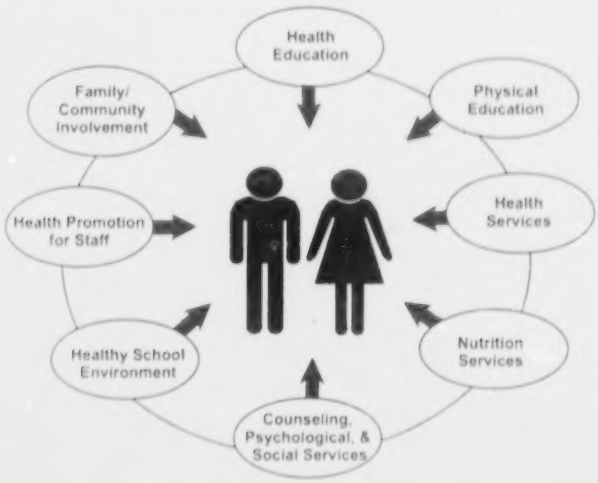
Importance	**How important is the recommendation?** 5 = Very important 3 = Somewhat important 1 = Not very important
Cost	**How expensive would it be to plan and implement the recommendation?** 5 = Not very expensive 3 = Moderately expensive 1 = Very expensive
Time	**How much time and effort would be needed to implement the recommendation?** 5 = Modest time and effort 3 = Somewhat high time and effort 1 = Very high time and effort
Commitment	**How enthusiastic would the school community be about implementing the recommendation?** 5 = Very enthusiastic 3 = Somewhat enthusiastic 1 = Not enthusiastic
Feasibility	**How attainable is the recommendation?** 5 = Fairly easy to attain 3 = Somewhat difficult to attain 1 = Very difficult to attain

Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points

Module 3: Physical Education

Instructions for Module Coordinator

Physical activity and eating behaviors are influenced by the entire school environment, not just the cafeteria and gymnasium. That's why the School Health Index has eight different modules, corresponding to the eight components of a coordinated school health program shown below.



Instructions for completing the module

1. Organize a team to complete the module. Below are some suggested team members for this module. Choose team members who you think are appropriate to represent your school and community.

   Physical education teacher
   Teacher(s)
   Coach(es)
   Parent(s)
   Student(s)

2. Provide each team member with a copy of the Questionnaire.
3. Photocopy the Score Card and Planning Questions before writing on them, as they are master copies designed for repeated use.
4. As a team, discuss each question and its scoring descriptions, seek out any information needed to accurately answer each question, arrive at a consensus on a score for each question, and record scores on the Score Card. (Answer each question as accurately as possible. The Index is **your** self-assessment tool for identifying strengths and weaknesses and for planning improvements.)

   Note: Testing of the School Health Index has shown that it takes approximately 1 hour to complete each of modules 1-4, and approximately 30 minutes to complete each of modules 5-8. This may not include time that it takes to seek out needed information.
5. Total the scores at the bottom of the Score Card.
6. As a team, based on the scores awarded, answer the three Planning Questions located at the end of the module. (The answers to these questions will serve as the basis for a meeting of all who completed Index modules to discuss overall results and plan improvements. Be prepared to discuss your findings and recommendations.)

Good luck in your efforts to improve the health of young people!

Module 3: Physical Education

Score Card (photocopy before using)

Instructions: To complete this Score Card, first carefully read and discuss the Questionnaire on the following pages which contains specific questions and scoring descriptions. After all questions have been scored, respond to the Planning Questions at the end of the module.

		Fully In Place	Partially In Place	Under Development	No
3.1	At least 225 minutes of physical education per week	3	2	1	0
3.2	Sequential physical education curriculum	3	2	1	0
3.3	Curriculum consistent with standards	3	2	1	0
3.4	Teacher/student ratio	3	2	1	0
3.5	Physical education grades	3	2	1	0
3.6	Prohibit substitution for physical education	3	2	1	0
3.7	Focus on development of competency and proficiency in movement forms	3	2	1	0
3.8	Individualized physical activity/fitness plans	3	2	1	0
3.9	Health-related physical fitness	3	2	1	0
3.10	Fitness testing preparation	3	2	1	0
3.11	Safety standards	3	2	1	0
3.12	Instruction for students with special health care needs	3	2	1	0
3.13	Students active at least 50% of class time	3	2	1	0
3.14	Teachers avoid practices that result in student inactivity	3	2	1	0
3.15	Physical education is enjoyable	3	2	1	0
3.16	Promote community physical activities	3	2	1	0
3.17	Certified physical education teachers	3	2	1	0
3.18	Continuing education for teachers	3	2	1	0
3.19	Participation in extracurricular physical activity programs	3	2	1	0
3.20	Training requirements for coaches	3	2	1	0

Total the number of circled responses in each column				
Multiply by the point value	x 3	x 2	x 1	x 0
Subtotals	+	+	+	0
Total points earned				
Total points possible				60
Percentage (total points earned/60) x 100				%

Module 3: Physical Education

Questionnaire

3.1 At least 225 minutes of physical education per week

Do all students receive daily physical education for at least 225 minutes on at least three days, but preferably five days, of the week throughout the year?

"Physical education" means structured physical education classes or lessons, not physical activity breaks and not substitution of physical education course credit with participation in a sport team, ROTC, marching band, etc.

3 = **Yes.**
2 = **135-224 minutes** on **at least three days** of the week throughout the year.
1 = **135 or more minutes** on **one or two days** of the week throughout the year.
0 = **Less than 135 minutes** per week.

3.2 Sequential physical education curriculum

Do all who teach physical education use a sequential physical education curriculum?

"All who teach" includes classroom teachers if they provide any physical education instruction at your school.

"Sequential" means a curriculum that builds on concepts taught in preceding years.

3 = **Yes.**
2 = **Some** do, and there are **plans to require all** to do so.
1 = **Some** do, but there are **no plans to require all** to do so.
0 = **None do,**
or the curriculum is not sequential,
or there is no physical education curriculum.

3.3 Curriculum consistent with standards

Is the physical education curriculum consistent with both the state standards for physical education and the National Standards for Physical Education?

"Consistent" means that the curriculum addresses the key learning objectives identified by the standards.

Note: The National Standards for Physical Education are provided on the next page.

3 = **Yes.** (Note: If your state does not have state standards, but the curriculum is consistent with national standards, select 3.)
2 = It's consistent with either state **or** national standards, but not both.
1 = **No,** but there are **plans to make it consistent** with standards.
0 = **No,**
or there is no physical education curriculum.

National Standards for Physical Education

A physically educated person:

1. Demonstrates competency in many movement forms and proficiency in a few movement forms.
2. Applies movement concepts and principles to the learning and development of motor skills.
3. Exhibits a physically active lifestyle.
4. Achieves and maintains a health-enhancing level of physical fitness.
5. Demonstrates responsible personal and social behavior in physical activity settings.
6. Demonstrates understanding and respect for differences among people in physical activity settings.
7. Understands that physical activity provides opportunities for enjoyment, challenge, self-expression, and social interaction.

National Association for Sport and Physical Education. *Moving into the Future: National Standards for Physical Education.* Boston: WCB/McGraw-Hill, 1995.

3.4 Teacher/student ratio

Do physical education classes have a teacher/student ratio comparable to other classes?

"Comparable" means approximately the same number of students per teacher as other classes.

Note: Aides or volunteers should not be counted as teachers in the teacher/student ratio.

3 = **Yes.**
2 = The ratio is **somewhat larger** (e.g., up to one and a half times larger) than most other classes.
1 = The ratio is **considerably larger** (e.g., more than one and a half times larger), but there are **plans to decrease** it.
0 = The ratio is **considerably larger** (e.g., more than one and a half times larger), and there are **no plans** to decrease it.

3.5 Physical education grades

Do students earn grades for required physical education courses? Do the grades count as much as grades for other subjects toward academic recognition (e.g., honor roll, class rank)?

3 = **Yes.** (Note: If the school does not give academic recognition, but does give a grade, you can select 3.)
2 = Students **earn grades, but** they count less than grades for other subjects.
1 = **No,** but there are plans to change this.
0 = **No,**
or there are no required physical education courses.

3.6 Prohibit substitution for physical education

Does the school prohibit substitution of other courses or activities for physical education?

"Prohibit substitution" means that the school does not allow courses or activities such as interscholastic athletics, ROTC, marching band, and community athletics to be substituted for physical education courses and/or credits.

3 = **Yes**.

2 = **Yes**, but occasional exceptions are made.

1 = **No**, but there are **plans to start prohibiting** subsitution.

0 = **No**.

3.7 Focus on development of competency and proficiency in movement forms

Does the physical education program focus on students' development of competency in many movement forms and proficiency in some movement forms?

"Competency" means sufficient ability, consistency of performance, and confidence to participate successfully and enjoyably in physical activities and to facilitate continued learning.

"Proficiency" means advanced ability resulting in higher levels of performance.

Examples of "movement forms" include:

- various forms of dance (e.g., folk, ballroom, popular),
- various individual/dual sports (e.g., running, golf, tennis, gymnastics),
- various team sports (soccer, softball, basketball, volleyball), and
- swimming and other aquatic activities (e.g., diving, water aerobics, water polo).

3 = **Yes**, it focuses on development of **competency in many**, and **proficiency in some**, movement forms.

2 = It focuses on development of **competency in some**, and **proficiency in some or no**, movement forms.

1 = It **does not** focus on development of competency in movement forms, **but** there are **plans to implement this focus.**

0 = It **does not** focus on development of competency in movement forms.

3.8 Individualized physical activity/fitness plans

Does the physical education program help students develop the knowledge and skills needed to design and implement their own individualized physical activity/fitness plans? Do physical education teachers provide ongoing feedback to students regarding progress in implementing their plans?

"Individualized physical activity/fitness plan" means a written plan that contains:

- ✔ long- and short-term personal goals for participating regularly in physical activities and maintaining or improving health-related fitness,
- ✔ specific actions to achieve those goals,
- ✔ timeline for taking specific actions, assessing progress, and achieving goals,
- ✔ methods that will be used to record actions taken and assess progress, and
- ✔ rewards for achieving goals.

3 = **Yes**.

2 = The program helps students design and implement their individualized plans, **but** teachers do not provide ongoing feedback.

1 = **No**, but there are **plans to start** doing this.

0 = **No**.

3.9 Health-related physical fitness

Does the physical education program integrate instruction on health-related fitness into many lessons throughout the year?

"Integrate instruction" means providing opportunities for students to learn and practice:

- ✔ knowledge related to health-related fitness,
- ✔ behavioral skills related to health-related fitness,
- ✔ physical activities that contribute to health-related fitness, and
- ✔ self-assessment of health-related fitness.

"Health-related fitness" means cardiovascular endurance, flexibility, muscular strength, muscular endurance, and body composition.

3 = **Yes.**

2 = Into only **some** lessons.

1 = Into **one or two** lessons (e.g., as part of a fitness unit and/or fitness testing).

0 = **No.**

3.10 Fitness testing preparation

Do physical education teachers properly prepare students for fitness testing before it is conducted?

Note: If you do not conduct fitness testing, skip this question.

By "properly prepare" we mean that students:
- ✔ are oriented to the testing procedures,
- ✔ have been provided with opportunities to practice the tests, and
- ✔ understand what the results mean and how to apply them.

3 = Yes, in all **three** ways listed above.
2 = In **two** of the ways.
1 = In **one or none** of the ways, but there are **plans for more thorough preparation.**
0 = In **one or none** of the ways.

3.11 Safety standards

Does the physical education program follow safety standards related to the following?
- ✔ *adequate supervision*
- ✔ *use of protective clothing and safety equipment*
- ✔ *appropriate dress and footwear*
- ✔ *regular inspection and repair of facilities and equipment*
- ✔ *minimizing exposure to sun, smog and extreme temperatures*
- ✔ *infection control practices for handling blood and other body fluids*

3 = **Yes**, for all **six** of the issues listed above.
2 = For **four or five** of the issues.
1 = For **three** of the issues.
0 = For **two or less** of the issues.

3.12 Instruction for students with special health care needs

Does the physical education program consistently use instructional practices that are appropriate for students with special health care needs?

Examples of such "instructional practices" include:
- conducting adapted physical education classes,
- adapting physical education goals and objectives,
- adapting tests,
- adapting sports and activities,
- using modified equipment and facilities,
- utilizing a second teacher, aide, physical therapist or occupational therapist to assist, and
- utilizing peer teaching (e.g., teaming students without special health care needs and students with special health care needs).

Examples of "special health care needs" include learning disabilties, developmental disabilies, behavioral disorders, physical disabilities, temporary physical limitations, and medical conditions such as diabetes, asthma, and scoliosis.

3 = **Yes.**

2 = The physical education program uses at least some of these instructional practices, **but not consistently** (e.g., not by all teachers or not in all classes that include students with special health care needs).

1 = **None** of the practices are used, but there are **plans to implement some.**

0 = **None** of the practices are used.

3.13 Students active at least 50% of class time

Do teachers keep students moderately to vigorously active at least 50% of the time during most or all physical education classes?

"Moderately to vigorously active" means engaging in physical activity that is equal in intensity to, or more strenuous than, fast walking.

"At least 50% of the time" means at least half of the total time scheduled for a physical education class session.

3 = **Yes.**

2 = During **about half** of the classes.

1 = During **few or none** of the classes, but there are **plans to increase activity time.**

0 = During **few or none** of the classes.

3.14 Teachers avoid practices that result in student inactivity

Do teachers avoid using practices that result in some students spending considerable time being inactive in physical education classes?

Examples of such "practices" include:

- using games that eliminate students,
- having many students stand in line or on the sidelines watching others and waiting for a turn,
- organizing activities in which less than half of the students have a piece of equipment and/or a physically active role, and
- allowing highly-skilled students to dominate activities and games.

3 = They **never** use these practices.
2 = They **seldom** use these practices.
1 = They **frequently** use these practices, but there are **plans to stop using them.**
0 = They **frequently** use these practices, and there are **no plans** to stop using them.

3.15 Physical education is enjoyable

Do most students, including most of those who are athletically gifted and most of those who are not athletically gifted, find physical education to be an enjoyable experience?

3 = **Yes**, most of one group **and** most of the other group find it to be enjoyable.
2 = **Most** of one group, **but** few of the other group find it to be enjoyable.
1 = **Few** in both groups find it to be enjoyable, but there are **plans to make it more enjoyable.**
0 = **Few** in both groups find it to be enjoyable.

3.16 Promote community physical activities

Does the physical education program use three or more methods to promote student participation in a variety of community physical activity programs?

Examples of "methods" include:

- discussions in class,
- bulletin boards,
- public address announcements,
- take-home flyers,
- homework assignments,
- newsletter articles, and
- giving credit for participation in community physical activities and programs.

Examples of "community physical activity programs" are clubs, teams, recreational classes, special events, and use of playgrounds, parks, and bike paths.

3 = **Yes**.
2 = The physical education program promotes participation, **but** only through one or two methods,
or only in one or two types of programs.
1 = **No**, but there are **plans to do so**.
0 = **No**.

3.17 Certified physical education teachers

Are all physical education courses taught by certified physical education teachers?

"Certified" means those teachers who have been awarded a credential by the state permitting them to teach physical education.

3 = **Yes.**
2 = **Most** courses are taught by a certified physical education teacher.
1 = **Few** courses are taught by a certified physical education teacher.
0 = **No** courses are taught by certified physical education teachers.

3.18 Continuing education for teachers

Do most or all who teach physical education participate in professional development/continuing education in physical education at least once a year?

"Professional development/continuing education" means on-site (e.g., school, district) and off-site (e.g., city, state, national) training opportunities.

3 = **Yes.**
2 = **About half** do.
1 = **Few or none** do, but there are **plans for more to participate.**
0 = **Few or none** do.

3.19 Participation in extracurricular physical activity programs

Do at least 50% of boys and 50% of girls participate in school-sponsored extracurricular physical activity programs?

3 = **Yes,** at least 50% of boys **and** at least 50% of girls participate.
2 = At least 50% of one sex, **but** less than 50% of the other sex, participate.
1 = **Less than** 50% of boys and less than 50% of girls participate.
0 = There are no extracurricular physical activity programs.

3.20 Training requirements for coaches

Does the school or district require all interscholastic athletic coaches to have training in the sport(s) they coach that reflects competency in the skills and knowledge outlined in the National Standards for Athletic Coaches?

"Training" means taking courses taught within a college/university professional preparation program or courses provided by the school district, community youth sports programs, or national coaching education programs.

3 = **Yes**.

2 = The school or district requires training **but** does not require that the training reflect competency in the skills and knowledge outlined in the *National Standards for Athletic Coaches*.

1 = The school or district **does not** require training, but there are **plans to start**.

0 = The school or district **does not** require training.

National Standards for Athletic Coaches

The 37 standards are grouped into the following eight domains:

1. Injuries: Prevention, Care and Management
2. Risk Management
3. Growth, Development and Learning
4. Training, Conditioning and Nutrition
5. Social/Psychological Aspects of Coaching
6. Skills, Tactics and Strategies
7. Teaching and Administration
8. Professional Preparation and Development

National Association for Sport and Physical Education. *Quality Coaches, Quality Sports: National Standards for Athletic Coaches*. Dubuque (IA): Kendall/Hunt, 1995.

Module 3: Physical Education

Planning Questions (photocopy before using)

These Planning Questions will help your school use its Index results to identify and prioritize changes needed to improve your physical activity and nutrition programs. Answers should be reviewed when completing the Planning for Improvement section of the Index.

1. Based on the scores earned for each question, what are the strengths and weaknesses of your school's physical education program?

2. To improve each of the weaknesses identified in question 1, identify recommendations for action.

3. Rate each of the recommendations identified in question 2 on the following five aspects: importance, cost, time, commitment, and feasibility. Rate each aspect on a scale of 1 to 5 using the chart below.

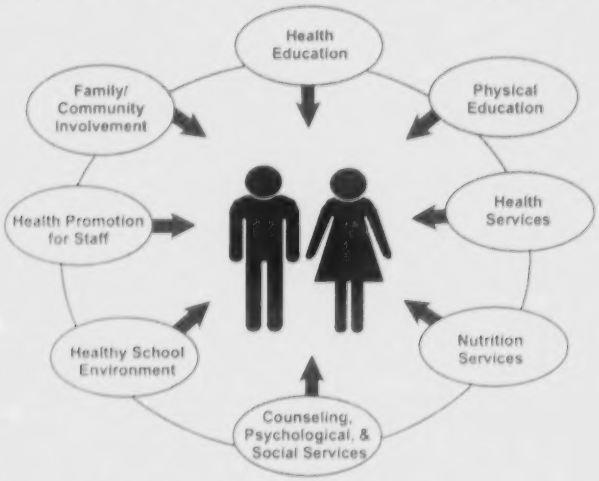
Importance	**How important is the recommendation?** 5 = Very important 3 = Somewhat important 1 = Not very important
Cost	**How expensive would it be to plan and implement the recommendation?** 5 = Not very expensive 3 = Moderately expensive 1 = Very expensive
Time	**How much time and effort would be needed to implement the recommendation?** 5 = Modest time and effort 3 = Somewhat high time and effort 1 = Very high time and effort
Commitment	**How enthusiastic would the school community be about implementing the recommendation?** 5 = Very enthusiastic 3 = Somewhat enthusiastic 1 = Not enthusiastic
Feasibility	**How attainable is the recommendation?** 5 = Fairly easy to attain 3 = Somewhat difficult to attain 1 = Very difficult to attain

Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points

Module 4: Nutrition Services

Instructions for Module Coordinator

Physical activity and eating behaviors are influenced by the entire school environment, not just the cafeteria and gymnasium. That's why the School Health Index has eight different modules, corresponding to the eight components of a coordinated school health program shown below.



Instructions for completing the module

1. Organize a team to complete the module. Below are some suggested team members for this module. Choose team members who you think are appropriate to represent your school and community.

   School food service manager
   School food service staff member(s)
   Health education teacher
   Teacher(s)
   Parent(s)
   Student(s)

2. Provide each team member with a copy of the Questionnaire.
3. Photocopy the Score Card and Planning Questions before writing on them, as they are master copies designed for repeated use.
4. As a team, discuss each question and its scoring descriptions, seek out any information needed to accurately answer each question, arrive at a consensus on a score for each question, and record scores on the Score Card. (Answer each question as accurately as possible. The Index is **your** self-assessment tool for identifying strengths and weaknesses and for planning improvements.)

   Note: Testing of the School Health Index has shown that it takes approximately 1 hour to complete each of modules 1-4, and approximately 30 minutes to complete each of modules 5-8. This may not include time that it takes to seek out needed information.
5. Total the scores at the bottom of the Score Card.
6. As a team, based on the scores awarded, answer the three Planning Questions located at the end of the module. (The answers to these questions will serve as the basis for a meeting of all who completed Index modules to discuss overall results and plan improvements. Be prepared to discuss your findings and recommendations.)

Good luck in your efforts to improve the health of young people!

Module 4: Nutrition Services

Score Card (photocopy before using)

Instructions: To complete this Score Card, first carefully read and discuss the Questionnaire on the following pages which contains specific questions and scoring descriptions. After all questions have been scored, respond to the Planning Questions at the end of the module.

		Fully In Place	Partially In Place	Under Development	No
4.1	School breakfast and lunch programs	3	2	1	0
4.2	Variety of foods in school meals	3	2	1	0
4.3	Low-fat and skim milk available	3	2	1	0
4.4	Meals include appealing, low-fat choices of fruits, vegetables, grains, and dairy products	3	2	1	0
4.5	A la carte offerings include appealing, low-fat choices of fruits, vegetables, grains, and dairy products	3	2	1	0
4.6	Venues outside the cafeteria offer appealing, low-fat fruits, vegetables, grains, or dairy products	3	2	1	0
4.7	Food purchasing and preparation practices to reduce fat content	3	2	1	0
4.8	Food serving practices to moderate fat and sodium intake	3	2	1	0
4.9	Healthy cafeteria selections promoted	3	2	1	0
4.10	Clean, safe, and pleasant cafeteria	3	2	1	0
4.11	Food emergency preparedness	3	2	1	0
4.12	Collaboration between food service staff and teachers	3	2	1	0
4.13	Food service manager's degree and certification	3	2	1	0
4.14	Continuing education for food service manager	3	2	1	0
	Total the number of circled responses in each column				
	Multiply by the point value	x 3	x 2	x 1	x 0
	Subtotals		+	+	+ 0
	Total points earned				
	Total points possible			42	
	Percentage (total points earned/42) x 100	57		%	

Module 4: Nutrition Services

Questionnaire

4.1 School breakfast and lunch programs

Does the school offer nutritious breakfast and lunch programs that are fully accessible to all students?

"Nutritious breakfast and lunch programs" means school- or district-sponsored programs that are designed to meet the U.S. Department of Agriculture's School Meal Nutrition Standards.

"Fully accessible" means that the school offers free and reduced-price meals for students who meet income requirements in a way that ensures that these students are not identified by other students as recipients of these programs and that the school coordinates class and bus transportation schedules so that all students can participate in the breakfast and lunch programs.

3 = **Yes**.

2 = The school offers breakfast and lunch programs, **but** they are not fully accessible to all students.

1 = The school offers **only a lunch program**, but there are **plans to add a breakfast program**.

0 = The school offers **only a lunch program**, **or** the school does not offer a breakfast or lunch program.

School Meal Nutrition Standards

All school meals, as part of the U.S.D.A. National School Lunch Program and the School Breakfast Program, must meet the statutory and regulatory nutrition standards defined below:

1. Providing one-third (lunch) and one-fourth (breakfast) of the Recommended Dietary Allowances (RDA) for protein, calcium, iron, vitamin A and vitamin C for the applicable age or grade groups.

2. Providing one-third of lunchtime energy allowances (calories) and one-fourth of the breakfast energy allowances for children based on the applicable age or grade groups.

3. The applicable recommendations of the *1995 Dietary Guidelines for Americans:*
   - ✔ eat a variety of foods;
   - ✔ limit total fat to 30% of calories;
   - ✔ limit saturated fat to less than 10% of calories;
   - ✔ choose a diet low in cholesterol;
   - ✔ choose a diet with plenty of grain products, vegetables, and fruits;
   - ✔ choose a diet moderate in salt and sodium; and
   - ✔ choose a diet moderate in sugars.

Code of Federal Regulations, Title 7, Volume 4, Parts 210.10 (b)(c)(d) and 220.8 (a)(b)(c).

4.2 Variety of foods in school meals

Do school meals include a variety of foods?

"School meals" means a set of foods that meets school meal program regulations. This does not include a la carte line foods.

"Variety" means that at least:

- two entrees are offered for lunch daily,
- two choices of fruit or 100% fruit juice are offered for lunch daily,
- two choices of vegetables are offered for lunch daily, and
- five foods containing whole grain are offered weekly.

3 = **Yes**, for all **four** criteria.
2 = For **three** criteria
1 = For **one or two** criteria.
0 = **No** criteria are met.

4.3 Low-fat and skim milk available

Does the school food service offer low-fat and skim milk every day?

"Low-fat" means either ½% or 1% fat.

3 = **Yes**, low-fat **and** skim milk are offered **every day**.
2 = Either low-fat **or** skim milk is offered **every day**.
1 = Low-fat **or** skim milk is offered, but **not every day**.
0 = **Neither** is offered any day.

4.4 Meals include appealing, low-fat choices of fruits, vegetables, grains, and dairy products

Do school meals every day include at least one appealing, low-fat choice from each of the following food groups: fruits, vegetables, grains, and dairy products?

"Appealing" choices are food items that are acceptable to the majority of students, as indicated by some kind of evaluation such as plate waste or analysis of student food choices.

"Low-fat" means items that contain no more than 3 grams of fat per serving. In most cases, this would not include items such as fried potatoes, other fried foods, foods cooked with or covered with butter or margarine, fruits in pies or cobblers, cookies, cakes, and other pastries.

Examples of "low fat grains" include:

- pastas
- cereals, and
- bread products.

Note: School breakfasts should not be expected to include vegetables.

3 = **Yes.**
2 = From **three** of those food groups.
1 = From **one or two** of those food groups.
0 = Low-fat choices are offered from one or more of the groups, **or** the appeal of the choices offered has **not been evaluated**.

4.5 A la carte offerings include appealing, low-fat choices of fruits, vegetables, grains, and dairy products

Do the a la carte offerings every day include at least one appealing, low-fat choice from each of the following food groups: fruits, vegetables, grains, and dairy products?

"A la carte offerings" mean a set of foods from which students can choose individual items that are not usually counted as part of a reimbursable meal.

3 = **Yes**.

2 = From **three** of those food groups.

1 = From **one or two** of those food groups.

0 = Low-fat choices are offered from one or more of the groups, but the appeal of the choices offered has **not been evaluated**.

4.6 Venues outside the cafeteria offer appealing, low-fat fruits, vegetables, grains, or dairy products

Do most or all venues outside the cafeteria offer appealing, low-fat fruits, vegetables, grains, or dairy products?

Examples of "venues outside the cafeteria" are:

- concession stands,
- vending machines,
- school stores or canteens,
- parties and special events,
- meetings, and
- extended day programs (i.e., school-sponsored after-school programs).

3 = **Yes.**

2 = **About half** of the venues do.

1 = **Less than half** do, but there are **plans to start including** these types of food items in more venues.

0 = **Few or none** do.

4.7 Food purchasing and preparation practices to reduce fat content

Does the school food service consistently engage in food preparation practices that reduce the fat content of foods served?

Examples of such "practices" include:

- spoon solid fat from chilled meat or poultry broth before using,
- adjust specification for pre-prepared foods such as hamburgers, pizzas, chicken nuggets, etc. to require lower fat content,
- rinse browned meat with hot water to remove grease before adding to other ingredients,
- remove skin from poultry before or after cooking,
- roast, bake, or broil meat rather than fry it,
- roast meat/poultry on rack so fat will drain,
- use low-fat or reduced-fat cheese on pizza,
- prepare vegetables using little or no fat, and
- cook with non-stick spray or pan liners rather than grease or oil.

3 = **Yes**, for all **nine** practices listed above.
2 = For **five to eight** practices.
1 = For **three or four** practices.
0 = For **two or fewer** practices.

4.8 Food serving practices to moderate fat and sodium intake

Does the school food service consistently follow food serving practices that make it easier for students to moderate their fat and sodium intake?

Examples of such "practices" include:

- offering low-fat spreads, such as jam, jelly, or honey, for breads and rolls,
- offering low-fat salad dressings,
- not providing butter or margarine as a spread, and
- not providing salt on tables.

3 = **Yes**, for all **four** practices listed above.
2 = For **two or three** practices.
1 = For **one** practice.
0 = **None** of these practices are followed.

4.9 Healthy cafeteria selections promoted

Are cafeteria selections low in fat, sodium, and added sugars consistently promoted and advertised?

Examples of ways to "promote and advertise" include:

- display nutritional information about available foods,
- display promotional materials,
- highlight healthy cafeteria selections in menus that are distributed or posted,
- offer taste-testing opportunities, and
- make school-wide audio or video announcements.

3 = **Yes,** through **three or more** promotion methods.
2 = Through **one or two** methods.
1 = **No**, but there are **plans to start** doing so.
0 = **No**.

4.10 Clean, safe, and pleasant cafeteria

Does the school provide students with a safe, clean, and pleasant cafeteria?

Criteria for "safe, clean, and pleasant" are:

- the cafeteria has a physical structure (e.g., walls, floor covering) that does not need repairs,
- tables and chairs are without damage and are the appropriate size for all students,
- seating is not overcrowded (e.g., never more than 100% of capacity),
- rules for safe behavior (e.g., no running, no throwing of food or utensils) are enforced,
- tables and floors are cleaned between lunch periods or shifts,
- age-appropriate decorations are used,
- appropriate practices are used to prevent excessive noise levels (i.e., no whistles or traffic lights),
- smells are pleasant and not offensive, and
- the cafeteria has appropriate eating devices when needed for students with special health care needs.

3 = **Yes**, for all **nine** criteria listed above.
2 = For **five to eight** criteria.
1 = For **three or four** criteria.
0 = For **two or fewer** criteria.

4.11 Food emergency preparedness

Are school food service staff trained to respond quickly and effectively to the following types of food emergencies?

- *choking*
- *natural disasters (e.g., electrical outages affecting refrigeration)*
- *medical emergencies (e.g., severe food allergy reactions)*

3 = **Yes**, for all **three** types of emergencies.
2 = For **two** types.
1 = For **one** type.
0 = **No**.

4.12 Collaboration between food service staff and teachers

Do food service staff and teachers collaborate to reinforce nutrition education lessons taught in the classroom?

Examples of ways to "collaborate" include:

- ✔ participate in the design and implementation of nutrition education programs,
- ✔ display educational and informational materials that reinforce classroom lessons,
- ✔ provide food to be used in classroom nutrition education lessons,
- ✔ provide ideas for classroom nutrition education lessons,
- ✔ teach a lesson or give a presentation to students, and
- ✔ provide cafeteria tours for classes.

3 = **Yes**, through **three or more** collaboration methods listed above.
2 = Through a **one or two** methods, but there are **plans to use additional methods**.
1 = **No**, but there are **plans to start** doing so.
0 = **No**.

4.13 Food service manager's degree and certification

Does the school's food service manager have a nutrition-related baccalaureate or graduate degree and certification/credentialing in food service from either the state or the American School Food Service Association?

3 = **Yes**, a degree **and** certification/credentialing.
2 = A degree **or** certification/credentialing, but not both.
1 = **Neither** a degree nor certification/credentialing, but he/she is **working on one or both.**
0 = **Neither** a degree nor certification.

4.14 Continuing education for food service manager

Does the food service manager participate in professional development/continuing education on meeting the Dietary Guidelines for Americans (e.g., meal planning, recipe modification and substitutions, food purchasing and preparation practices) and on nutrition education to promote healthy eating choices at least once a year?

"Professional development/continuing education" means on-site (school, district) and off-site (city, state, national) training opportunities.

3 = **Yes**.
2 = On one topic, **but** not the other.
1 = **No**, but there are **plans to participate in the near future**.
0 = **No**.

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Module 4: Nutrition Services

Planning Questions (photocopy before using)

These Planning Questions will help your school use its Index results to identify and prioritize changes needed to improve your physical activity and nutrition programs. Answers should be reviewed when completing the Planning for Improvement section of the Index.

1. Based on the scores earned for each question, what are the strengths and weaknesses of your school's nutrition services?

2. To improve each of the weaknesses identified in question 1, identify recommendations for action.

3. Rate each of the recommendations identified in question 2 on the following five aspects: importance, cost, time, commitment, and feasibility. Rate each aspect on a scale of 1 to 5 using the chart below.

Importance	**How important is the recommendation?** 5 = Very important 3 = Somewhat important 1 = Not very important
Cost	**How expensive would it be to plan and implement the recommendation?** 5 = Not very expensive 3 = Moderately expensive 1 = Very expensive
Time	**How much time and effort would be needed to implement the recommendation?** 5 = Modest time and effort 3 = Somewhat high time and effort 1 = Very high time and effort
Commitment	**How enthusiastic would the school community be about implementing the recommendation?** 5 = Very enthusiastic 3 = Somewhat enthusiastic 1 = Not enthusiastic
Feasibility	**How attainable is the recommendation?** 5 = Fairly easy to attain 3 = Somewhat difficult to attain 1 = Very difficult to attain

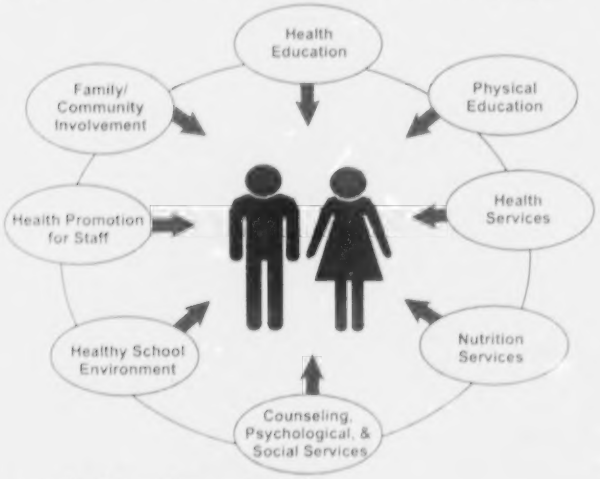
Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points

63

Module 5: School Health Services

Instructions for Module Coordinator

Physical activity and eating behaviors are influenced by the entire school environment, not just the cafeteria and gymnasium. That's why the School Health Index has eight different modules, corresponding to the eight components of a coordinated school health program shown below.



Instructions for completing the module

1. Organize a team to complete the module. Below are some suggested team members for this module. Choose team members who you think are appropriate to represent your school and community.

   School nurse
   Parent(s)
   Student(s)
   Community-based health care provider

2. Provide each team member with a copy of the Questionnaire.
3. Photocopy the Score Card and Planning Questions before writing on them, as they are master copies designed for repeated use.
4. As a team, discuss each question and its scoring descriptions, seek out any information needed to accurately answer each question, arrive at a consensus on a score for each question, and record scores on the Score Card. (Answer each question as accurately as possible. The Index is **your** self-assessment tool for identifying strengths and weaknesses and for planning improvements.)

   Note: Testing of the School Health Index has shown that it takes approximately 1 hour to complete each of modules 1-4, and approximately 30 minutes to complete each of modules 5-8. This may not include time that it takes to seek out needed information.

5. Total the scores at the bottom of the Score Card.
6. As a team, based on the scores awarded, answer the three Planning Questions located at the end of the module. (The answers to these questions will serve as the basis for a meeting of all who completed Index modules to discuss overall results and plan improvements. Be prepared to discuss your findings and recommendations.)

Good luck in your efforts to improve the health of young people!

Module 5: School Health Services

Score Card (photocopy before using)

Instructions: To complete this Score Card, first carefully read and discuss the Questionnaire on the following pages which contains specific questions and scoring descriptions. After all questions have been scored, respond to the Planning Questions at the end of the module.

		Fully In Place	Partially In Place	Under Development	No
5.1	Promote physical activity	3	2	1	0
5.2	Promote healthy eating	3	2	1	0
5.3	Collaborate with staff	3	2	1	0
5.4	Identify and refer students with problems	3	2	1	0
5.5	Student medical information relevant to physical activity	3	2	1	0
5.6	Student medical information relevant to special dietary needs	3	2	1	0

Total the number of circled responses in each column				
Multiply by the point value	x 3	x 2	x 1	x 0
Subtotals	+	+	+	0
Total points earned				
Total points possible	18			
Percentage (total points earned/18) x 100	%			

Module 5: School Health Services

Questionnaire

5.1 Promote physical activity

Does the school nurse or other health services provider actively promote physical activity to students and their families through the following?

- ✔ *distribution of educational materials*
- ✔ *individual advice*
- ✔ *small group discussions*
- ✔ *presentations*

"School nurse" means a licensed nurse employed by the school or district.

"Other health services provider" means a health professional from the community providing service to the school on either a contracted or volunteer basis.

3 = **Yes**, through **three or four** of the methods listed above.
2 = Through **one or two** of the methods listed above.
1 = **No**, but **there are plans to start doing so.**
0 = **No,**
or the school does not have a school nurse or other health services provider.

5.2 Promote healthy eating

Does the school nurse or other health services provider actively promote healthy eating to students and their families through the following?

- ✔ *distribution of educational materials*
- ✔ *individual advice*
- ✔ *small group discussions*
- ✔ *presentations*

3 = **Yes**, through **three or four** of the methods listed above.
2 = Through **one or two** of the methods listed above.
1 = **No**, but **there are plans to start doing so.**
0 = **No,**
or the school does not have a school nurse or other health services provider.

5.3 Collaborate with staff

Does the school nurse or other health services provider collaborate with other school staff to promote physical activity and healthy eating?

Examples of ways to "collaborate" include:

- policy development,
- curriculum development,
- unit/lesson planning,
- special events and projects,
- in-service training on the health and academic benefits of physical activity and good nutrition, and
- encourage screening and referral of students.

Examples of "other school staff" include:

- counselors,
- psychologists,
- social workers,
- health education teachers,
- physical education teachers,
- coaches,
- classroom teachers, and
- food service staff.

3 = **Yes.**

2 = Collaborates to promote physical activity **or** healthy eating, but not both.

1 = **No,** but there are **plans to collaborate.**

0 = **No,**
or the school does not have a school nurse or other health services provider.

5.4 Identify and refer students with problems

Does the school nurse or other health services provider identify students with physical activity- and nutrition-related problems? Are those students referred to the appropriate school- or community-based services?

Examples of "physical activity- and nutrition-related problems" include:

- obesity,
- asthma,
- eating disorders,
- steroid use,
- anemia,
- diabetes, and
- food allergies.

3 = **Yes.**

2 = Identifies students, **but** does not refer them to appropriate services
or refers them only to school-based services.

1 = **No,** but there are **plans to do start identifying and referring** students.

0 = **No,**
or the school does not have a school nurse or other health services provider.

5.5 Student medical information relevant to physical activity

Is student medical information collected at least once a year that is relevant to participation in physical activity (e.g., chronic medical conditions such as asthma)? When necessary and parents or guardians give permission, is this information provided to physical education teachers and other appropriate staff members?

Examples of "appropriate staff members" include:

- ✔ physical education teachers,
- ✔ coaches,
- ✔ classroom teachers, and
- ✔ individuals conducting school-sponsored before- or after-school physical activity programs.

3 = Yes.

2 = Someone collects the information, **but** it is collected less than once a year, **or** it is not provided to all appropriate staff (e.g., physical education teacher receives the information but recess supervisor does not).

1 = No, but there are **plans to start collecting and sharing** it with appropriate staff.

0 = No.

5.6 Student medical information relevant to special dietary needs

Is student medical information collected at least once a year that is relevant to special dietary needs of students (e.g., food allergies, diabetes)? When necessary and parents or guardians give permission, is this information provided to food service staff and other appropriate staff members?

3 = Yes.

2 = Someone collects the information, **but** it is collected less than once a year, **or** it is not provided to food service staff and/or classroom teachers.

1 = No, but there are **plans to start collecting and sharing** it with appropriate staff.

0 = No.

Module 5: School Health Services

(photocopy before using)

These Planning Questions will help your school use its Index results to identify and prioritize changes needed to improve your physical activity and nutrition programs. Answers should be reviewed when completing the Planning for Improvement section of the Index.

1. Based on the scores earned for each question, what are the strengths and weaknesses of your school's health services?

2. To improve each of the weaknesses identified in question 1, identify recommendations for action.

3. Rate each of the recommendations identified in question 2 on the following five aspects: importance, cost, time, commitment, and feasibility. Rate each aspect on a scale of 1 to 5 using the chart below.

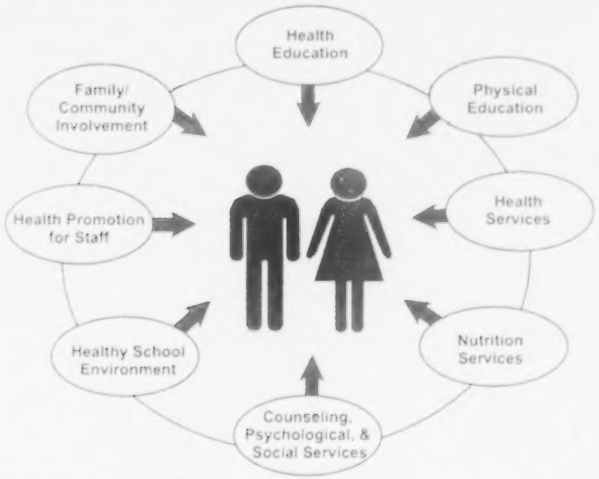
Importance	**How important is the recommendation?** 5 = Very important 3 = Somewhat important 1 = Not very important
Cost	**How expensive would it be to plan and implement the recommendation?** 5 = Not very expensive 3 = Moderately expensive 1 = Very expensive
Time	**How much time and effort would be needed to implement the recommendation?** 5 = Modest time and effort 3 = Somewhat high time and effort 1 = Very high time and effort
Commitment	**How enthusiastic would the school community be about implementing the recommendation?** 5 = Very enthusiastic 3 = Somewhat enthusiastic 1 = Not enthusiastic
Feasibility	**How attainable is the recommendation?** 5 = Fairly easy to attain 3 = Somewhat difficult to attain 1 = Very difficult to attain

Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points

Module 6: School Counseling, Psychological, and Social Services

Instructions for Module Coordinator

Physical activity and eating behaviors are influenced by the entire school environment, not just the cafeteria and gymnasium. That's why the School Health Index has eight different modules, corresponding to the eight components of a coordinated school health program shown below.



Instructions for completing the module

1. Organize a team to complete the module. Below are some suggested team members for this module. Choose team members who you think are appropriate to represent your school and community.

   School counselor
   School psychologist
   School social worker
   Parent(s)
   Student(s)
   Community-based social services provider

2. Provide each team member with a copy of the Questionnaire.
3. Photocopy the Score Card and Planning Questions before writing on them, as they are master copies designed for repeated use.
4. As a team, discuss each question and its scoring descriptions, seek out any information needed to accurately answer each question, arrive at a consensus on a score for each question, and record scores on the Score Card. (Answer each question as accurately as possible. The Index is **your** self-assessment tool for identifying strengths and weaknesses and for planning improvements.)

   Note: Testing of the School Health Index has shown that it takes approximately 1 hour to complete each of modules 1-4, and approximately 30 minutes to complete each of modules 5-8. This may not include time that it takes to seek out needed information.
5. Total the scores at the bottom of the Score Card.
6. As a team, based on the scores awarded, answer the three Planning Questions located at the end of the module. (The answers to these questions will serve as the basis for a meeting of all who completed Index modules to discuss overall results and plan improvements. Be prepared to discuss your findings and recommendations.)

Good luck in your efforts to improve the health of young people!

Module 6: School Counseling, Psychological, and Social Services

Score Card (photocopy before using)

Instructions: To complete this Score Card, first carefully read and discuss the Questionnaire on the following pages which contains specific questions and scoring descriptions. After all questions have been scored, respond to the Planning Questions at the end of the module.

		Fully In Place	Partially In Place	Under Development	No
6.1	Promote physical activity	3	2	1	0
6.2	Promote healthy eating	3	2	1	0
6.3	Collaborate with staff	3	2	1	0
6.4	Identify and refer students with problems	3	2	1	0
Total the number of circled responses in each column					
Multiply by the point value		x 3	x 2	x 1	x 0
Subtotals			+	+	+ 0
Total points earned					
Total points possible				12	
Percentage (total points earned/12) x 100				%	

Module 6: School Counseling, Psychological, and Social Services

Questionnaire

6.1 Promote physical activity

Do the school counseling, psychological, or social services staff actively promote physical activity to students and their families through the following?

- ✓ *distribution of educational materials*
- ✓ *individual advice*
- ✓ *small group discussions*
- ✓ *presentations*

3 = **Yes**, through **three or four** of the methods listed above.
2 = Through **one or two** of the methods.
1 = **No**, but there are **plans to start doing so**.
0 = **No**,
or the school does not have any counseling, psychological, and social services staff.

6.2 Promote healthy eating

Do the school counseling, psychological, or social services staff actively promote healthy eating to students and their families through the following?

- ✓ *distribution of educational materials*
- ✓ *individual advice*
- ✓ *small group discussions*
- ✓ *presentations*

3 = **Yes**, through **three or four** of the methods listed above.
2 = Through **one or two** of the methods.
1 = **No**, but there are **plans to start doing so**.
0 = **No**,
or the school does not have any counseling, psychological, and social services staff.

6.3 Collaborate with staff

Do the counseling, psychological, or social services staff collaborate with other school staff to promote physical activity and healthy eating?

Examples of ways to "collaborate" include:
- policy development,
- curriculum development,
- unit/lesson planning,
- special events and projects, and
- in-service training on the health and academic benefits of physical activity and good nutrition.

Examples of "other school staff" include:
- school nurse or other health care provider,
- health education teachers,
- physical education teachers,
- coaches,
- classroom teachers, and
- food service staff.

3 = **Yes.**
2 = Collaborates to promote physical activity **or** healthy eating, but not both.
1 = **No**, but there are **plans to collaborate.**
0 = **No,**
or the school does not have any counseling, psychological, or social services staff.

6.4 Identify and refer students with problems

Do the school counseling, psychological, or social services staff identify students with physical activity- and nutrition-related problems? Are those identified referred to the appropriate school- or community-based services?

Examples of "physical activity- and nutrition-related problems" include:
- obesity,
- asthma,
- anemia,
- eating disorders, and
- steroid use.

3 = **Yes.**
2 = Collaborates to identify students, **but** does not refer them to appropriate services **or** refers them only to school-based services.
1 = **No**, but there are **plans to do start identifying and referring** students.
0 = **No,**
or the school does not have any counseling, psychological, or social services staff.

Module 6: School Counseling, Psychological, and Social Services

Planning Questions (photocopy before using)

These Planning Questions will help your school use its Index results to identify and prioritize changes needed to improve your physical activity and nutrition programs. Answers should be reviewed when completing the Planning for Improvement section of the Index.

1. Based on the scores earned for each question, what are the strengths and weaknesses of your school's counseling, psychological, and social services?

2. To improve each of the weaknesses identified in question 1, identify recommendations for action.

5. Rate each of the recommendations identified in question 2 on the following five aspects: importance, cost, time, commitment, and feasibility. Rate each aspect on a scale of 1 to 5 using the chart below.

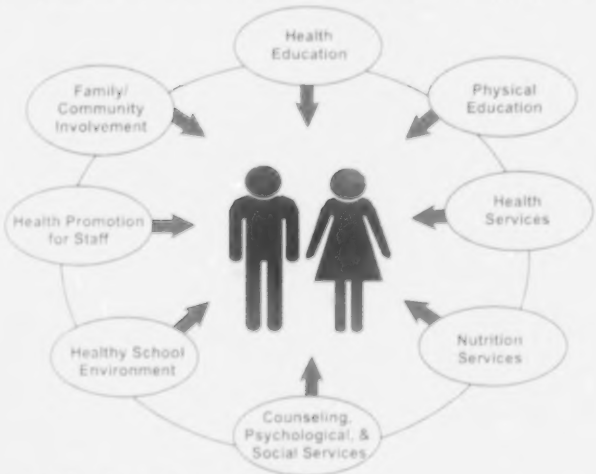
Importance	**How important is the recommendation?** 5 = Very important 3 = Somewhat important 1 = Not very important
Cost	**How expensive would it be to plan and implement the recommendation?** 5 = Not very expensive 3 = Moderately expensive 1 = Very expensive
Time	**How much time and effort would be needed to implement the recommendation?** 5 = Modest time and effort 3 = Somewhat high time and effort 1 = Very high time and effort
Commitment	**How enthusiastic would the school community be about implementing the recommendation?** 5 = Very enthusiastic 3 = Somewhat enthusiastic 1 = Not enthusiastic
Feasibility	**How attainable is the recommendation?** 5 = Fairly easy to attain 3 = Somewhat difficult to attain 1 = Very difficult to attain

Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points

Module 7: Health Promotion for Staff

Instructions for Module Coordinator

Physical activity and eating behaviors are influenced by the entire school environment, not just the cafeteria and gymnasium. That's why the School Health Index has eight different modules, corresponding to the eight components of a coordinated school health program shown below.



Instructions for completing the module

1. Organize a team to complete the module. Below are some suggested team members for this module. Choose team members who you think are appropriate to represent your school and community.

   Physical eduction teacher
   School nurse
   Teacher(s)
   Community health agency representative(s)
   (e.g., American Cancer Society, public health department)

2. Provide each team member with a copy of the Questionnaire.
3. Photocopy the Score Card and Planning Questions before writing on them, as they are master copies designed for repeated use.
4. As a team, discuss each question and its scoring descriptions, seek out any information needed to accurately answer each question, arrive at a consensus on a score for each question, and record scores on the Score Card. (Answer each question as accurately as possible. The Index is **your** self-assessment tool for identifying strengths and weaknesses and for planning improvements.)

   Note: Testing of the School Health Index has shown that it takes approximately 1 hour to complete each of modules 1-4, and approximately 30 minutes to complete each of modules 5-8. This may not include time that it takes to seek out needed information.
5. Total the scores at the bottom of the Score Card.
6. As a team, based on the scores awarded, answer the three Planning Questions located at the end of the module. (The answers to these questions will serve as the basis for a meeting of all who completed Index modules to discuss overall results and plan improvements. Be prepared to discuss your findings and recommendations.)

Good luck in your efforts to improve the health of young people!

Module 7: Health Promotion for Staff

Score Card (photocopy before using)

Instructions: To complete this Score Card, first carefully read and discuss the Questionnaire on the following pages which contains specific questions and scoring descriptions. After all questions have been scored, respond to the Planning Questions at the end of the module.

		Fully In Place	Partially In Place	Under Development	No
7.1	Health screening for staff	3	2	1	0
7.2	Physical activity/fitness programs for staff	3	2	1	0
7.3	Nutrition education/weight management programs for staff	3	2	1	0
7.4	Promote and encourage staff participation	3	2	1	0
7.5	Budget for staff health promotion	3	2	1	0
	Total the number of circled responses in each column				
	Multiply by the point value	x 3	x 2	x 1	x 0
	Subtotals		+	+	+ 0
	Total points earned				
	Total points possible			15	
	Percentage (total points earned/15) x 100			%	

Module 7: Health Promotion for Staff

Questionnaire

7.1 Health screening for staff

Does the school or district offer or provide easy access to a free or reasonably priced physical health screening for staff at least once a year?

"Provide access to" means that the school or district has a special arrangement for staff to receive health screening either on- or off-site through a community program.

Examples of items that are part of a "health screening" include:

- ✓ height and weight,
- ✓ blood pressure,
- ✓ cholesterol screening, and
- ✓ diabetes/blood sugar screening.

3 = **Yes**.

2 = Offers or provides access to a health screening, **but** it is not reasonably priced **or** not easily accessible.

1 = **No**, but there are **plans to do so.**

0 = **No**.

7.2 Physical activity/fitness programs for staff

Does the school or district offer or provide easy access to free or reasonably priced physical activity/fitness programs for staff?

"Provide access to" means that the school or district has a special arrangement for staff to take classes at a community facility.

Examples of such "programs" include:

- ✓ classes,
- ✓ workshops,
- ✓ facilities, and
- ✓ special events.

3 = **Yes**.

2 = Offers or provides access to physical activity/fitness programs, **but** they are not reasonably priced **or** not easily accessible.

1 = **No**, but there are **plans to do so.**

0 = **No**.

7.3 Nutrition education/weight management programs for staff

Does the school or district offer or provide easy access to free or reasonably priced nutrition education/weight management programs for staff members?

3 = **Yes.**
2 = Offers or provides access to nutrition education/weight management programs, **but** they are not reasonably priced **or** not easily accessible.
1 = **No**, but there are **plans to do so**.
0 = **No**.

7.4 Promote and encourage staff participation

Does the school or district promote and encourage staff participation in its physical activity/fitness and nutrition education/weight management programs?

Examples of ways to "promote and encourage staff participation" include:
- ✓ information at new staff orientation,
- ✓ information on programs provided with paychecks,
- ✓ flyers posted on school walls,
- ✓ letters mailed directly to staff,
- ✓ announcements at staff meetings,
- ✓ staff newsletter articles,
- ✓ incentive/reward programs,
- ✓ public recognition, and
- ✓ health insurance discounts.

3 = **Yes**, through **two** or more ways listed above.
2 = Through **one** of the ways.
1 = **No**, but there are **plans to start doing so**.
0 = **No**.

7.5 Budget for staff health promotion

Is there a school or district budget for staff health promotion that includes a salary for a coordinator?

"Coordinator" means a full- or part-time employee who is responsible for planning, designing, implementing, and evaluating staff health promotion activities.

3 = **Yes.**
2 = There is a budget, **but** it does not include a salary for a full- or part-time coordinator (although the school or district may have a volunteer coordinator).
1 = **No**, but **there are plans to create a budget**.
0 = **No**.

Module 7: Health Promotion for Staff

Planning Questions (photocopy before using)

These Planning Questions will help your school use its Index results to identify and prioritize changes needed to improve your physical activity and nutrition programs. Answers should be reviewed when completing the Planning for Improvement section of the Index.

1. Based on the scores earned for each question, what are the strengths and weaknesses of your school's health promotion for staff?

2. To improve each of the weaknesses identified in question 1, identify recommendations for action.

3. Rate each of the recommendations identified in question 2 on the following five aspects: importance, cost, time, commitment, and feasibility. Rate each aspect on a scale of 1 to 5 using the chart below.

Importance	**How important is the recommendation?** 5 = Very important 3 = Somewhat important 1 = Not very important
Cost	**How expensive would it be to plan and implement the recommendation?** 5 = Not very expensive 3 = Moderately expensive 1 = Very expensive
Time	**How much time and effort would be needed to implement the recommendation?** 5 = Modest time and effort 3 = Somewhat high time and effort 1 = Very high time and effort
Commitment	**How enthusiastic would the school community be about implementing the recommendation?** 5 = Very enthusiastic 3 = Somewhat enthusiastic 1 = Not enthusiastic
Feasibility	**How attainable is the recommendation?** 5 = Fairly easy to attain 3 = Somewhat difficult to attain 1 = Very difficult to attain

Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points

Module 8: Family and Community Involvement

Instructions for Module Coordinator

Physical activity and eating behaviors are influenced by the entire school environment, not just the cafeteria and gymnasium. That's why the School Health Index has eight different modules, corresponding to the eight components of a coordinated school health program shown below:

Instructions for completing the module

1. Organize a team to complete the module. Below are some suggested team members for this module. Choose team members who you think are appropriate to represent your school and community:

   Parent(s)
   Student(s)
   Teacher(s)
   School nurse
   Community health agency representative(s)
   (e.g., American Cancer Society, public health department)

2. Provide each team member with a copy of the Questionnaire.
3. Photocopy the Score Card and Planning Questions before writing on them, as they are master copies designed for repeated use.
4. As a team, discuss each question and its scoring descriptions, seek out any information needed to accurately answer each question, arrive at a consensus on a score for each question, and record scores on the Score Card. (Answer each question as accurately as possible. The Index is **your** self-assessment tool for identifying strengths and weaknesses and for planning improvements.)

   Note: Testing of the School Health Index has shown that it takes approximately 1 hour to complete each of modules 1-4, and approximately 30 minutes to complete each of modules 5-8. This may not include time that it takes to seek out needed information.

5. Total the scores at the bottom of the Score Card.
6. As a team, based on the scores awarded, answer the three Planning Questions located at the end of the module. (The answers to these questions will serve as the basis for a meeting of all who completed Index modules to discuss overall results and plan improvements. Be prepared to discuss your findings and recommendations.)

Good luck in your efforts to improve the health of young people!

Module 8: Family and Community Involvement

Score Card (photocopy before using)

Instructions: To complete this Score Card, first carefully read and discuss the Questionnaire on the following pages which contains specific questions and scoring descriptions. After all questions have been scored, respond to the Planning Questions at the end of the module.

		Fully In Place	Partially In Place	Under Development	No
8.1	Educate families about physical activity and healthy eating	3	2	1	0
8.2	Student and family input into programs	3	2	1	0
8.3	Students and parents involved in school meal planning	3	2	1	0
8.4	Parents and community involved in implementing programs	3	2	1	0
8.5	School staff promote community-based programs and resources	3	2	1	0
8.6	Community access to school facilities outside of school hours	3	2	1	0
Total the number of circled responses in each column					
Multiply by the point value		x 3	x 2	x 1	x 0
Subtotals			+	+	+ 0
Total points earned					
Total points possible				18	
Percentage (total points earned/18) x 100				%	

Module 8: Family and Community Involvement

Questionnaire

8.1 Educate families about physical activity and healthy eating

Does the school provide families with many opportunities to learn about physical activity and healthy eating through educational materials sent home and involvement in school-sponsored activities?

Examples of "educational materials" include:

- ✓ brochures,
- ✓ newsletter articles,
- ✓ introduction to curricula, and
- ✓ homework assignments that require family participation.

Examples of "school-sponsored activities" include:

- ✓ parent/teacher meetings,
- ✓ health fairs,
- ✓ food tastings,
- ✓ international meals,
- ✓ field day,
- ✓ walkathons, and
- ✓ fun runs.

3 = **Yes.**

2 = Provides **few** opportunities,
or provides opportunities to learn about physical activity **or** healthy eating, but not both.

1 = **No**, but there are **plans to start providing opportunities.**

0 = **No.**

8.2 Student and family input into programs

Does the school formally obtain and review, at least once a year, input from students and their families about their satisfaction with the physical activity and nutrition programs?

3 = **Yes.**

2 = From students **or** their families, but not both,
or less often than once a year.

1 = **No**, but there are **plans to start obtaining input.**

0 = **No.**

8.3 Students and parents involved in meal planning

Are students and parents involved in planning school meals?

Examples of being "involved" include:
- ✓ providing menu and recipe suggestions,
- ✓ identifying food preferences, and
- ✓ participating in taste-testing activities.

3 = **Yes**.
2 = Students **or** parents are involved, but not both.
1 = **Neither** are involved, but there are **plans to involve** one or both.
0 = **Neither** are involved.

8.4 Parents and community involved in implementing programs

Do parents and other community members help plan and implement school physical activity and nutrition programs?

Examples of ways to "help plan and implement" include:
- ✓ volunteering to help in the classroom, cafeteria, or with special events,
- ✓ serving on a curriculum committee, and
- ✓ designing or conducting a needs assessment or program evaluation.

3 = **Yes**.
2 = They help plan and implement physical activity **or** nutrition programs, but not both.
1 = **No**, but **there are plans for future involvement**.
0 = **No**.

8.5 School staff promote community-based programs and resources

Do school staff inform students and their families of community-based physical activity and nutrition programs and resources?

Examples of "community-based physical activity programs" include youth sports and recreation and fitness programs.

Examples of "community-based nutrition programs" include WIC, Food Stamps, local food pantries, and Cooperative Extension.

Examples of "community-based resources" include public health departments, American Cancer Society, and American Heart Association.

3 = **Yes.**
2 = Staff inform about community-based physical activity **or** nutrition programs, but not both.
1 = **No**, but there are **plans to start providing information**.
0 = **No**.

8.6 Community access to school facilities outside of school hours

Do community members have access to school physical activity facilities outside of school hours to participate in or conduct programs?

"Outside of school hours" means after school, evenings, weekends, and school vacations.

3 = **Yes.**
2 = The access is quite limited,
or there is substantial cost involved.
1 = **No**, but there are **plans to start allowing access** to community members.
0 = **No**.

Module 8: Family and Community Involvement

Planning Questions (photocopy before using)

These Planning Questions will help your school use its Index results to identify and prioritize changes needed to improve your physical activity and nutrition programs. Answers should be reviewed when completing the Planning for Improvement section of the Index.

1. Based on the scores earned for each question, what are the strengths and weaknesses of your school's family and community involvement?

2. To improve each of the weaknesses identified in question 1, identify recommendations for action.

3. Rate each of the recommendations identified in question 2 on the following five aspects: importance, cost, time, commitment, and feasibility. Rate each aspect on a scale of 1 to 5 using the chart below.

Importance	**How important is the recommendation?** 5 = Very important 3 = Somewhat important 1 = Not very important
Cost	**How expensive would it be to plan and implement the recommendation?** 5 = Not very expensive 3 = Moderately expensive 1 = Very expensive
Time	**How much time and effort would be needed to implement the recommendation?** 5 = Modest time and effort 3 = Somewhat high time and effort 1 = Very high time and effort
Commitment	**How enthusiastic would the school community be about implementing the recommendation?** 5 = Very enthusiastic 3 = Somewhat enthusiastic 1 = Not enthusiastic
Feasibility	**How attainable is the recommendation?** 5 = Fairly easy to attain 3 = Somewhat difficult to attain 1 = Very difficult to attain

Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points

Planning for Improvement

The goal is simple: to develop strong, healthy children who come to school ready and able to learn. Among the hundreds of individual actions you can take to meet this goal, you've already begun the most important: careful planning as a result of an appraisal of strengths and weaknesses. No matter how your school scores on the School Health Index, you now have the information you need to steadily improve and move towards your goal.

Taking Action, One Step at a Time

Now that all eight modules of the School Health Index have been completed, it is time to reflect on your school's strengths and identify and discuss areas for improvement. This section, Planning for Improvement, contains three types of forms that will assist you in making the best use of the information collected in each module.

Form One — Overall Score Card

Form Two — Recommendation Assessment Worksheet

Form Three — Action Plan Worksheet

Five action steps described in this section can help you to plan for improvement and implement recommended changes.

Step One — Complete the Overall Score Card

Step Two — Complete the Recommendation Assessment Worksheet

Step Three — Complete the Action Plan Worksheet

Step Four — Implement recommendations

Step Five — Reassess annually and strive for continuous improvement

STEP ONE. **Use the completed module Score Cards to fill in the *Overall Score Card*.** When completed, the Overall Score Card will help you to determine which of the eight module areas are in greatest need of improvement. Part A will show the total percentage achieved for each module, and Part B will show the spread of scores (3, 2, 1, and 0 points) for each module.

STEP TWO. **Schedule a meeting at which each module team will present their list of recommendations**. Discuss the recommendations as a group and list on the *Recommendation Assessment Worksheet* those recommendations that are worthy of further consideration. The worksheet will help you prioritize the recommendations by having you consider five critical factors:

- **Importance**: Rate the importance of the recommendation (1= Not very important; 3 = Somewhat important; 5= Very important). Consider how many students will be positively affected by the recommendation, and how much impact the recommendation will have on their health behavior.
- **Cost**: Estimate the costs of the personnel time, supplies, materials, equipment, travel, and anything else needed to implement the recommendation (1=Very expensive; 3=Moderately expensive; 5=Not very expensive).

- **Time**: Rate the amount of time and effort associated with implementing the recommendation (1=Very high time and effort; 3 = Somewhat high time and effort; 5 = Modest time and effort). How long will it take and how much personnel effort is required? For complex recommendations, planning could take as long as a year, with implementation taking place in the following school year.
- **Commitment**: Rate how enthusiastic key members of the school community would be about making the change (1=Not enthusiastic; 3 = Somewhat enthusiastic; 5 = Very enthusiastic). Who is needed to implement the recommendation and to what extent do they have the motivation to see the project through?
- **Feasibility**: Rate how likely it is that you will actually be able to successfully implement the recommendation (1=Very difficult to attain; 3 = Somewhat difficult to attain; 5= Fairly easy to attain). Consider all potential barriers to implementation, as well as all factors that will facilitate implementation.

After rating each recommendation on these factors, write the sum of the ratings in the "Total" column. In the last column of the worksheet, indicate the rank order you have decided for implementing the recommendations. Consider the "Total" column when ranking the recommendations, but don't feel that you are obliged to follow the numerical totals. Some very important actions may be too expensive, labor intensive or too complex to rank number one. Others may be less important, but require fewer resources or staff to implement. Use the collective judgment and knowledge of your team members. Together, they know the school well and will arrive at the best mix of achievable, important recommendations.

STEP THREE. **Once you have prioritized the recommendations, use the *Action Plan Worksheet* to further develop the groups' ideas**. For each recommendation, briefly describe the activities, materials and personnel needed, time frame, and method of evaluation.

Activities: List the activities required to meet the recommendation. Examples of possible activities may include training teachers and staff, selecting curriculum, writing a new policy and submitting it to the school board, and raising funds.

Materials, resources, and personnel: Who would be responsible for planning and implementing the recommendation? List the individuals who will do the work and the resources and tools they need to get the job done.

Time frame: What's the estimated planning time? When will implementation begin? How long will it take to finish? You may want to set a month-by-month planning timetable.

Evaluation: How will you measure success (or disappointment)? What are the milestones for accomplishment? Consider evaluating three different factors: a) Has planning for the implementation of the recommendation been completed? b) Are the month-by-month stages of implementation being met? c) Is the recommendation having the intended effect? You may need to consult an evaluation expert at the school district office, state education agency or local university to help you measure whether the recommendation is having the intended effect.

Decide at the meeting who will prepare a concise summary report of your findings and recommendations. Present the report to the school administration (or site decision-making team) for approval and inclusion in the school improvement plan.

STEP FOUR. **Once you get your recommendations approved for implementation by the school or school district administration, implement the recommendations and monitor progress**. Some actions can be handled quickly and easily by a single person. Others may require information gathering, fund-raising, or a group effort. A full discussion of project management is beyond the scope of this guide, but some general principles may be useful to review:

- Form implementation workgroups so as not to overwhelm any single person.
- Most positive changes will take some time to get put in place, but delayed gratification can be frustrating for many volunteers. Having a mix of long- and short-term goals ensures enough accomplishment to keep the team motivated while still tackling the bigger issues.
- When planning how to implement a complex recommendation (e.g., develop and implement a 6-12th grade sequential health education curriculum that addresses nutrition and physical activity), break it into a set of smaller tasks (e.g., form curriculum planning committee, write goals and objectives, review existing curricula, write curriculum, plan in-service training).
- Create a timeline of activities and set implementation milestones, either monthly or quarterly.
- Establish a mechanism for reporting progress, so that there is some level of accountability. Ongoing monitoring of activities and strategies is essential for smooth and successful implementation. Special achievements and problems should be recognized and discussed.
- Gain commitment from all key school constituencies.
- If you need money and it's not available internally, don't be shy about visiting your local businesses. This is especially true for small grants under $1,000. Write a short, two-page proposal making use of the national data presented at the beginning of the School Health Index.
- Ask for help when you need it. See the School Health Index Resource section for information on national organizations that might be of assistance. Look for help from the school district, state department of education, and local universities.
- Recognize your volunteers. Write letters of appreciation and publicize their good work, so the entire community will know about their contributions.

STEP FIVE. **Establish an annual School Health Index assessment**. An annual assessment will ensure that children's health remains high on the school agenda. Take the time to measure and recognize the progress and accomplishments of the previous school year. Report annually to the principal, superintendent, and school board on progress made during the past year and plans for continuous improvement in the upcoming year.

School Health Index
Overall Score Card

Instructions: Use information from the individual Module Score Cards to complete parts A and B below.

Part A

For each module, place an X in the box for the percentage achieved

	Low 0-20%	21-40%	Medium 41-60%	61-80%	High 81-100%
Module 1: School Policies and Environment					
Module 2: Health Education					
Module 3: Physical Education					
Module 4: Nutrition Services					
Module 5: School Health Services					
Module 6: School Counseling, Psychological, and Social Services					
Module 7: Health Promotion for Staff					
Module 8: Family and Community Involvement					

Part B

For each module, write the number of items that received 0, 1, 2, and 3 points

	# of 0's	# of 1's	# of 2's	# of 3's
Module 1: School Policies and Environment				
Module 2: Health Education				
Module 3: Physical Education				
Module 4: Nutrition Services				
Module 5: School Health Services				
Module 6: School Counseling, Psychological, and Social Services				
Module 7: Health Promotion for Staff				
Module 8: Family and Community Involvement				

School Health Index

Recommendation Assessment Worksheet

Instructions: Refer to Planning Question #3 in each of the individual modules to decide on the top six recommendations for modules 1-4 and top three recommendations for modules 5-8. Your school team may want to transfer the ratings already given by the module teams in Planning Question #3, or you may want to discuss and re-rate each recommendation as a school team. Either way, the school team should use the ratings to decide on a priority ranking for each of the recommendations.

RATING INFORMATION

Importance	**How important is the recommendation?** 5 = Very important 3 = Somewhat important 1 = Not very important
Cost	**How expensive would it be to plan and implement the recommendation?** 5 = Not very expensive 3 = Moderately expensive 1 = Very expensive
Time	**How much time and effort would be needed to implement the recommendation?** 5 = Modest time and effort 3 = Somewhat high time and effort 1 = Very high time and effort
Commitment	**How enthusiastic would the school community be about implementing the recommendation?** 5 = Very enthusiastic 3 = Somewhat enthusiastic 1 = Not enthusiastic
Feasibility	**How attainable is the recommendation?** 5 = Fairly easy to attain 3 = Somewhat difficult to attain 1 = Very difficult to attain

Module 1: School Policies and Environment							
Recommendations	**Importance**	**Cost**	**Time**	**Commitment**	**Feasibility**	**Total Points**	**Priority Ranking**
1.							
2.							
3.							
4.							
5.							
6.							

Module 2: Health Education							
Recommendations	**Importance**	**Cost**	**Time**	**Commitment**	**Feasibility**	**Total Points**	**Priority Ranking**
1.							
2.							
3.							
4.							
5.							
6.							

Module 3: Physical Education							
Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points	Priority Ranking
1.							
2.							
3.							
4.							
5.							
6.							

Module 4: Nutrition Services							
Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points	Priority Ranking
1.							
2.							
3.							
4.							
5.							
6.							

Module 5: School Health Services							
Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points	Priority Ranking
1.							
2.							
3.							

Module 6: School Counseling, Psychological, and Social Services							
Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points	Priority Ranking
1.							
2.							
3.							

Module 7: Health Promotion for Staff							
Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points	Priority Ranking
1.							
2.							
3.							

Module 8: Family and Community Involvement							
Recommendations	Importance	Cost	Time	Commitment	Feasibility	Total Points	Priority Ranking
1.							
2.							
3.							

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Action Plan Worksheet

Recommendations	Describe the recommendations from the Recommendation Assessment Worksheet.
Activities	List the activities required to meet the recommendation.
Materials, resources, and personnel	List the individuals who will do the work, and the resources and tools they will need to get the job done.
Time frame	When will implementation begin? How long will it take to finish?
Evaluation	How will you measure success (or disappointment)?

Module 1: School Policies and Environment				
Recommendations	**Activities**	**Materials, resources, and personnel**	**Time frame**	**Evaluation**
1.				
2.				
3.				
4.				
5.				
6.				

Module 2: Health Education				
Recommendations	**Activities**	**Materials, resources, and personnel**	**Time frame**	**Evaluation**
1.				
2.				
3.				
4.				
5.				
6.				

Module 3: Physical Education				
Recommendations	**Activities**	**Materials, resources, and personnel**	**Time frame**	**Evaluation**
1.				
2.				
3.				
4.				
5.				
6.				

Module 4: Nutrition Services				
Recommendations	**Activities**	**Materials, resources, and personnel**	**Time frame**	**Evaluation**
1.				
2.				
3.				
4.				
5.				
6.				

Module 5: School Health Services				
Recommendations	Activities	Materials, resources, and personnel	Time frame	Evaluation
1.				
2.				
3.				

Module 6: School Counseling, Psychological, and Social Services				
Recommendations	Activities	Materials, resources, and personnel	Time frame	Evaluation
1.				
2.				
3.				

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Module 7: Health Promotion for Staff				
Recommendations	**Activities**	**Materials, resources, and personnel**	**Time frame**	**Evaluation**
1.				
2.				
3.				

Module 8: Family and Community Involvement				
Recommendations	**Activities**	**Materials, resources, and personnel**	**Time frame**	**Evaluation**
1.				
2.				
3.				

Resources for School Physical Activity and Nutrition Programs

The purpose of this section is to provide you with information about key resources to assist you in strengthening your school's physical activity and nutrition programs.

Ordering information, including address, phone, fax, e-mail address, web site, and price, was reliable as of March 1999. The prices do not include shipping and handling.

Resources for All Index Modules

CDC School Health Guidelines

Guidelines for School and Community Programs to Promote Lifelong Physical Activity Among Young People, Centers for Disease Control and Prevention, 1997, no cost
Available from: Centers for Disease Control and Prevention; phone: (770)488-3168; fax: (770)488-3111; e-mail: ccdinfo@cdc.gov; web site: http://www.cdc.gov/nccdphp/dash/physact.htm

Guidelines for School Health Programs to Promote Lifelong Healthy Eating, Centers for Disease Control and Prevention, 1996, no cost
Available from: Centers for Disease Control and Prevention; phone: (770)488-3168; fax: (770)488-3111; e-mail: ccdinfo@cdc.gov; web site: http://www.cdc.gov/nccdphp/dash/nutguide.htm

Authoritative Recommendations and Reviews

Healthy People 2010: National Health Promotion and Disease Prevention Objectives, U.S. Department of Health and Human Services, 2000, no cost to download from web site
Available from: U.S. Department of Health and Human Services/Office of Disease Prevention and Health Promotion; web site: http://web.health.gov/healthypeople

Physical Activity

Physical Activity and Public Health: A Report of the Surgeon General, U.S. Department of Health and Human Services, 1996, $19 (full report), no cost for executive summary or to download from web site
Full report available from: Superintendent of Documents, P.O. Box 371954, Pittsburgh, PA 15250-7954; fax: (202)512-2250
Executive summary available from: Centers for Disease Control and Prevention; phone: (800)232-4674; web site: http://www.cdc.gov/nccdphp/sgr/sgr.htm

Physical Activity for Children: A Statement of Guidelines, National Association for Sport and Physical Education, 1998, $13
Available from: National Association for Sport and Physical Education; phone: (800)321-0789; fax: (301)567-9553

Physical Activity Guidelines for Adolescents: Consensus Statement, Sallis JF & Patrick K, *Pediatric Exercise Science*, 6(4):302-314, 1994

Nutrition

Dietary Guidelines for Americans, U.S. Department of Agriculture, 1995, no cost for one copy or to download from web site
Available from: Consumer Information Center, Department 378-C, Pueblo, CO 81009; phone: (719)948-4000; web site: http://www.nal.usda.gov/fnic/dga

Food Guide Pyramid, U.S. Department of Agriculture, 1992, no cost for one copy or to download from web site
Available from: Government Printing Office, Superintendent of Documents, PO Box 371954, Pittsburgh, PA 15250-7954; phone: (202)512-2250, web site: http://www.nal.usda.gov/fnic/Fpyr/pyramid.html

Guides to Coordinated School Health Programs

Guidelines for Comprehensive School Health Programs, American School Health Association, 1995, $8.25
Available from: American School Health Association; phone: (330)678-1601; fax: (330)678-4526; web site: http://www.ashaweb.org/pubs/

Health is Academic: A Guide to Coordinated School Health Programs, Marx E & Wooley SF (Eds.) with Northrop D, 1998, $24.95
Available from: Teachers College Press, phone: (800)575-6566; fax: (802)864-7626; e-mail: tcp.orders@aidcvt.com; web site: http://tc-press.tc.columbia.edu/order2.html

Healthy Students 2000: An Agenda for Continuous Improvement in America's Schools, Allensworth D, Symonds C & Olds S, 1994, $24.95
Available from: American School Health Association; (330)678-1601; fax: (330)678-4526; web site: http://www.ashaweb.org/pubs

Schools and Health, Our Nation's Investment, Institute of Medicine, 1997, $59.95, no cost to download summary from web site
Available from: National Academy Press; phone: (800)624-6242; web site: http://www.nap.edu/search/
Step by Step to Comprehensive School Health: The Program Planning Guide, Kane WM, 1993, $24.95
Available from: ETR Associates; phone: (800)321-4407; fax: (800)435-8433; web site: http://www.etr.org
Step by Step to Health Promoting Schools, Fetro J, 1998, $24.95
Available from: ETR Associates; phone: (800)321-4407; fax: (800)435-8433; web site: http://www.etr.org

Professional Journals

Health Education

Journal of Health Education
Published by: American Association for Health Education; phone: (800)213-0789
Journal of School Health
Published by: American School Health Association; phone: (330)678-1601

Physical Activity/Physical Education

Journal of Physical Education, Recreation and Dance
Published by: American Association for Active Lifestyles and Fitness, American Association for Leisure and Recreation, National Association for Sport and Physical Education, and National Dance Association; phone: (800)213-7193
Journal of Teaching in Physical Education
Published by: Human Kinetics Publishers, Inc.; phone: (800)747-4457
Research Quarterly for Exercise and Sport
Published by: American Alliance for Health, Physical Education, Recreation and Dance; phone: (800)213-7193
Strategies: A Journal for Physical and Sport Educators
Published by: National Association for Sport and Physical Education; phone: (800)213-7193
Teaching Elementary Physical Education
Published by: Human Kinetics Publishers, Inc.; phone: (800)747-4457

Nutrition

Journal of the American Dietetic Association
Published by: American Dietetic Association; phone: (800)366-1655
Journal of Nutrition Education
Published by: Society for Nutrition Education; phone: (800)235-6690
School Foodservice and Nutrition
Published by: American School Food Service Association; phone: (800)877-8822
School Food Service Research Review
Published by: American School Food Service Association; phone: (800)877-8822

Resources for Module 1: School Policies and Environment

Materials

Fit, Healthy, and Ready to Learn: An Education Policy Guide on Physical Activity, Healthy Eating, and Tobacco Use Prevention, National Association of State Boards of Education, 1999, $20
Available from: National Association of State Boards of Education, 277 S. Washington Street, Suite 100, Alexandria, VA 22134; phone: (800)220-5183

A Healthy School Environment, Henderson A & Rowe DE, chapter in *Health is Academic: A Guide to Coordinated School Health Programs*, Marx E & Wooley SF (Eds.) with Northrop D, 1998, $24.95
Available from: Teachers College Press; phone: (800)575-6566; fax: (802)864-7626; e-mail: tcp.orders@aidcvt.com; web site: http://tc-press.tc.columbia.edu/order2.html

Healthy Schools Healthy Futures: The Case for Improving School Environments, Henderson A, 1993, $19.95
Available from: ETR Associates; phone: (800)321-4407; fax: (800)-435-8433; web site: http://www.etr.org

Improving School Health: A Guide to School Health Councils, American Cancer Society (ACS), 1999, price determined by local ACS affiliates
Available from: your local ACS affiliate; look in your local phone book or call (800)ACS-2345

Physical Activity, Nutrition, and Tobacco Use Prevention School Resource Database, National School Boards Association, no cost for use
Available from: National School Boards Association; phone: (703)838-6169; fax: (703)548-5516; e-mail: schoolhealth@nsba.org; web site: http://www.nsba.org/schoolhealth/pant.htm

School Health: Helping Children Learn, National School Boards Association, 1991, $15
Available from: National School Boards Association; phone: (800)706-6722; fax: (703)548-5516

Physical Activity/Physical Education

Guidelines for the Development of Fitness, Physical Activity, Recreation, and Sport Facilities, Sawyer TH, LaRue R, Seidler T & Goldfine, B, 1999, $27
Available from: American Association for Active Lifestyles and Fitness; phone: (800)321-0789; fax: (301)567-9553

Physical Education Program Guidelines and Appraisal Checklist for Elementary School, National Association for Sport and Physical Education, 1994, $8
Available from: National Association for Sport and Physical Education; phone: (800)321-0789; fax: (301)567-9553

Physical Education Program Improvement and Self Study Guide for Middle School, National Association for Sport and Physical Education, 1998, $8
Available from: National Association for Sport and Physical Education; phone: (800)321-0789; fax: (301)567-9553

Physical Education Program Improvement and Self Study Guide for High School, National Association for Sport and Physical Education, 1998, $8
Available from: National Association for Sport and Physical Education; phone: (800)321-0789; fax: (301)567-9553

Principles of Safety in Physical Education and Sport (2nd ed.), Dougherty N (Ed.), 1994, $35
Available from: National Association for Sport and Physical Education; phone: (800)321-0789; fax: (301)567-9553

The Case for Elementary School Recess, American Association for Child's Right to Play, no cost to download from web site
Available from: American Association for the Child's Right to Play; web site: http://www.ipausa.org

Nutrition

Accommodating Children with Special Dietary Needs in the School Nutrition Program: Guidance for School Food Service Staff, U.S. Department of Agriculture/Team Nutrition, 1995, no cost
Available from: U.S. Department of Agriculture/Team Nutrition; 3101 Park Center Drive, Room 1010, Alexandria, VA 22302; phone: (703)305-1624; fax: (703)305-2879; e-mail: teamnutrition@fns.usda.gov

Creating Policy for Nutrition Integrity in Schools, American School Food Service Association, 1995, $7.50
Available from: American School Food Service Association Emporium; phone: (800)728-0728

Healthy Eating Helps You Make the Grade!, U.S. Department of Agriculture/Team Nutrition, 1999, no cost
Available from: U.S. Department of Agriculture/Team Nutrition; 3101 Park Center Drive, Room 1010, Alexandria, VA 22302; phone: (703)305-1624; fax: (703)305-2879; e-mail: teamnutrition@fns.usda.gov

How to Start a Nutrition Advisory Council in Your School, American School Food Service Association, 1998 (updated annually), no cost
Available from: American School Food Service Association; phone: (800)877-8822, ext. 140; fax: (703)739-3915

Nutrition: Making a Difference in Schools (videotape and participant notebook), Centers for Disease Control and Prevention, 1996, $28
Available from: Public Health Foundation; phone: (877)252-1200; fax: (301)843-0159

School-Based Nutrition Programs and Services: A Position of the ADA, SNE, and ASFSA, American Dietetic Association, Society for Nutrition Education & American School Food Service Association, 1995
Available in: *Journal of the American Dietetic Association*, 95(3):367-369, 1995; *Journal of Nutrition Education*, 27(2):58-61, 1995; *School Foodservice and Nutrition*, 49(5):45-46, 1995

Strategies for Success: A Resource Manual for SHAPE California Child Nutrition Programs, California Department of Education/Nutrition Education and Training Program, 1995, $15
Available from: California Department of Education; phone: (800)995-4099l; fax: (916)323-0823

Organizations

American Association for the Child's Right to Play
c/o Dr. Rhonda Clements, President
240 Hofstra University
Hempstead, NY 11550-1022
(516)463-5176
http://www.ipausa.org

American Association of School Administrators (AASA)
1801 N. Moore Street
Arlington, VA 22209
(703)528-0700
(703)841-1543 (fax)
http://www.aasa.org

American Cancer Society (ACS)
National Office
1599 Clifton Road, NE
Atlanta, GA 30329
(800)227-2345 (Cancer Information Center)
http://www.cancer.org

American School Food Service Association (ASFSA)
1600 Duke St., 7th Floor
Alexandria, VA 22314
(800)877-8822
(703)739-3915 (fax)
asfsa@asfsa.org
http://www.asfsa.org

American School Health Association (ASHA)
7263 State Route 43
PO Box 708
Kent, OH 44240
(330)678-1601
(330)678-4526 (fax)
http://www.ashaweb.org

Council of Chief State School Officers (CCSSO)
One Massachusetts Avenue, NW, Suite 700
Washington, DC 20001-1431
(202)408-5505
(202)408-8072 (fax)
http://www.ccsso.org

Food and Nutrition Information Center (FNIC)
Agricultural Research Service, USDA
National Agricultural Library, Room 304
10301 Baltimore Avenue
Beltsville, MD 20705-2351
(301)504-5719
(301)504-6409 (fax)
TTY: (301)504-6856
e-mail: fnic@nal.usda.gov
http://www.nal.usda.gov/fnic/

National Association of State Boards of Education (NASBE)
1012 Cameron Street
Alexandria, VA 22314
(703)684-4000
(703)836-2313 (fax)
boards@nasbe.org
http://www.nasbe.org

National Association for Sport and Physical Education (NASPE)
1900 Association Drive
Reston, VA 20191-1599
(800)213-7193, ext.410
(703)476-8316 (fax)
naspe@aahperd.org
http://www.aahperd.org/naspe/naspe.html

National Food Service Management Institute (NFSMI)
The University of Mississippi
PO Drawer 188
University, MS 38677-0188
(800)321-3054
(800)321-3061 (fax)
nfsmi@sunsetbackbone.olemiss.edu
http://www.olemiss.edu/depts/nfsmi

The National PTA
330 North Wabash Ave., Suite 2100
Chicago, IL 60611-3690
(312)670-6782
(312)670-6783 (fax)
info@pta.org
http://www.pta.org

National School Boards Association (NSBA)
1680 Duke Street
Alexandria, VA 22314-3493
(703)838-6722
(703)683-7590 (fax)
info@nsba.org
http://www.nsba.org

President's Council on Physical Fitness and Sports (PCPFS)
200 Independence Avenue, SW, Room 738H
Washington, DC 20201-0004
(202)690-9000
(202)690-5211 (fax)

Society for Nutrition Education (SNE)
7101 Wisconsin Avenue, Suite 901
Bethesda, MD 20814
(800)235-6690 or (301)656-4938
(301)656-4958 (fax)
info@sne.org
http://www.sne.org

U.S. Department of Agriculture/Center for Nutrition Policy and Promotion
1120 20th Street NW
Suite 200, North Lobby
Washington, DC 20036
(202)418-2312
(202)208-2322 (fax)
john.webster@usda.gov
http://www.usda.gov/cnpp

U.S. Department of Agriculture/ Team Nutrition
3101 Park Center Drive, Room 1010
Alexandria, VA 22302
(703)305-1624
(703)305-2879 (fax)
teamnutrition@fns.usda.gov
http://www.fns.usda.gov/tn/

Resources for Module 2: Health Education

Materials

Choosing the Tools: A Review of Selected K-12 Health Education Curriculum, Education Development Center, 1995, $19.95
Available from: Education Development Center; phone: (800)793-5076; fax: (412)741-0609; e-mail: edcorder@abdintl.com

A Competency-Based Framework for Professional Development of Certified Health Education Specialists, National Commission for Health Education Credentialing, 1996, $35
Available from: National Commission for Health Education Credentialing; phone: (888)624-3248; fax: (800) 813-0727; e-mail: ndecjms@fast.net; web site: http://www.nchec.org

Comprehensive School Health Education, Lohrmann DK & Wooley SF, chapter in *Health is Academic: A Guide to Coordinated School Health Programs*, Marx E & Wooley SF (Eds.) with Northrop D, 1998, $24.95
Available from: Teachers College Press; phone: (800)575-6566; fax: (802)864-7626; e-mail: tcp.orders@aidcvt.com; web site: http://tc-press.tc.columbia.edu/order2.html

Criteria for Comprehensive Health Education Curricula, English J & Sancho A, 1990, $2.75
Available from: American School Health Association; phone: (330)678-1601; fax: (330)678-4526; web site: http://www.ashaweb.org/pubs/

Cultural Awareness and Sensitivity: Guidelines for Health Educators, American Association for Health Education, 1994, $12.75
Available from: American Association for Health Education; phone: (800)321-0789; fax: (301)567-9553

Cultural Awareness and Sensitivity: Guidelines for Health Educators Question Booklet, American Association for Health Education, $4
Available from: American Association for Health Education; phone: (800)321-0789; fax: (301)567-9553

Cultural Awareness and Sensitivity: Resources for Health Educators, American Association for Health Education, 1994, $9.50
Available from: American Association for Health Education; phone: (800)321-0789; fax: (301)567-9553

Educating for Health: A Guide to Implementing a Comprehensive Approach to School Health Education, Marx E & Northrop D, 1995, $24.95
Available from: Education Development Center; phone: (800)793-5076; fax: (412)741-0609; e-mail: edcorder@abdintl.com

Health Education: Assessment Framework, Council of Chief State School Officers-State Collaborative on Assessment and Student Standards (SCASS) Health Education Project, 1998, $35 for SCASS members, $50 for non-members
Available from: ToucanEd Publications; phone: (831)464-0508; fax: (831)462-1129; web site: http://www.toucaned.com

Health Education: A Guide to Portfolios, Council of Chief State School Officers-State Collaborative on Assessment and Student Standards (SCASS) Health Education Project, 1999, $50 for SCASS members, $90 for non-members
Available from: ToucanEd Publications; phone: (831)464-0508; fax: (831)462-1129; web site: http://www.toucaned.com

Manual on Responsibilities and Competencies of Teachers of Young Adolescents for Promoting Healthy Development, American Association for Health Education, 1998, $14
Available from: American Association for Health Education; phone: (800)321-0789; fax: (301)567-9553

National Health Education Standards: Achieving Health Literacy, American Association for Health Education, American Cancer Society, American School Health Association, 1995, $3 (AAHE), $8 (ASHA)
Available from: American Association for Health Education; phone: (800)321-0789; fax: (301)567-9553; American School Health Association; phone: (330)678-1601; fax: (330)678-4526; web site: http://www.ashaweb.org/pubs/

Personal and Social Skills: Understanding and Integrating Competencies Across Health Content, Fetro JV, 1992, $39.95
Available from: ETR Associates; phone: (800)321-4407; fax: (800)435-8433; web site: http://www.etr.org

Ready for Teaching Health: Preparing the Student Teacher for School Health, Zaccone-Tzannetakis PR, 1999, $14.50
Available from: American Association for Health Education; phone: (800)321-0789; fax: (301)567-9553

Step by Step to Peer Health Education Programs: A Planning Guide, Goldsmith M & Reynolds ST, 1996, $24.95.
Available from: ETR Associates; phone: (800)321-4407; fax: (800)435-8433; web site: http://www.etr.org

Team Nutrition School Activity Planner: A How-To Guide for Team Nutrition Schools and Supporters, U.S. Department of Agriculture/Team Nutrition, 1997, no cost
Available from: U.S. Department of Agriculture/Team Nutrition; 3101 Park Center Drive, Room 1010, Alexandria, VA 22302; phone: (703)305-1624; fax: (703)305-2879; e-mail: teamnutrition@fns.usda.gov

Using the Food Guide Pyramid: A Resource for Nutrition Educators, U.S. Department of Agriculture/Center for Nutrition Policy and Promotion, 1996, no cost
Available from: U.S. Department of Agriculture/Center for Nutrition Policy and Promotion; web site: http://www.usda.gov/cnpp

Journal Articles

Inservice Preparation in Nutrition Education for Professionals and Paraprofessionals, Contento IR, *Journal of Nutrition Education*, 27(6):347-354, 1995

New Developments in Nutrition Education Using Computer Technology, Kolasa KM & Miller MG, *Journal of Nutrition Education*, 28(1):7-14, 1996

Nutrition Education for School-Aged Children, Contento IR, *Journal of Nutrition Education*, 27(6):298-311, 1995

Organizations

American Association for Health Education (AAHE)
1900 Association Drive
Reston, VA 20191-1599
(800)213-7193, ext.437
(703)476-6638 (fax)
aahe@aahperd.org
http://www.aahperd.org/aahe/aahe.html

American Cancer Society (ACS)
National Office
1599 Clifton Road, NE
Atlanta, GA 30329
(800)227-2345
http://www.cancer.org

American Heart Association (AHA)
National Office
7272 Greenville Avenue
Dallas, TX 75231-4596
(800)242-8721
http://www.americanheart.org

American School Health Association (ASHA)
7263 State Route 43
PO Box 708
Kent, OH 44240
(330)678-1601
(330)678-4526 (fax)
http://www.ashaweb.org

National 5 A Day Program
National Cancer Institute
6130 Executive Boulevard EPN 232
Bethesda, MD 20892-7332
(301)496-8520
(301)496-6637 (fax)
http://dccps.nci.nih.gov/5aday

National Heart, Lung, and Blood Institute (NHLBI)
NHBLI Information Center
PO Box 30105
Bethesda, MD 20824-0105
(301)251-1222
(301)251-1223 (fax)
nhlbiic@dgsys.com
http://www.nhlbi.nih.gov

Society for Nutrition Education (SNE)
7101 Wisconsin Avenue, Suite 901
Bethesda, MD 20814
(800)235-6690
(301)656-4958 (fax)
info@sne.org
http://www.sne.org

Society of State Directors of Health, Physical Education and Recreation (SSDHPER)
1900 Association Drive
Reston, VA 20191-1599
(800)213-7193, ext. 402
(703)476-9527 (fax)
http://www.thesociety.org

U.S. Department of Agriculture/Team Nutrition
3101 Park Center Drive, Room 1010
Alexandria, VA 22302
(703)305-1624
(703)305-2879 (fax)
teamnutrition@fns.usda.gov
http://www.fns.usda.gov/tn/

Resources for Module 3: Physical Education

Materials

The first 12 materials listed below are available from the National Association for Sport and Physical Education; phone: (800)321-0789; fax: (301)567-9553

Appropriate Practices for High School Physical Education, National Association for Sport and Physical Education, 1998, $5

Appropriate Practices for Middle School Physical Education, National Association for Sport and Physical Education, 1995, $5

Concepts of Physical Education: What Every Student Needs to Know, Mohnsen B (Ed.), 1998, $59.95

Developmentally Appropriate Physical Education Practices for Children, National Association for Sport and Physical Education, 1992, $5

Including Students with Disabilities in Regular Physical Education, National Association for Sport and Physical Education, American Association for Active Lifestyles and Fitness, 1995, $5

Moving into the Future: National Standards for Physical Education, A Guide to Content and Assessment, National Association for Sport and Physical Education, 1995, $22

National Standards for Beginning Physical Education Teachers, National Association for Sport and Physical Education, 1995, $15

Physical Education Program Guidelines and Appraisal Checklist for Elementary School, National Association for Sport and Physical Education 1994, $8

Physical Education Program Improvement and Self Study Guide for High School, National Association for Sport and Physical Education, 1998, $8

Physical Education Program Improvement and Self Study Guide for Middle School, National Association for Sport and Physical Education, 1998, $8

Principles of Safety in Physical Education and Sport (2nd ed.), Dougherty N (Ed.), 1994, $35

Quality Coaches, Quality Sports: National Standards for Athletic Coaches, National Association for Sport and Physical Education, 1995, $22

Active Youth: Ideas for Implementing CDC Physical Activity Promotion Guidelines, Samman P, 1998, $12
Available from: Human Kinetics Publishers; phone: (800)747-4457; fax: (217)351-1549; web site: http://www.humankinetics.com

Adapted Physical Education National Standards, National Consortium for Physical Education and Recreation for Individuals with Disabilities, 1995, $26
Available from: Human Kinetics Publishers; phone: (800)747-4457; fax: (217)351-1549; web site: http://www.humankinetics.com

Complete Guide to Youth Fitness Testing, Safrit MJ & Pemberton C, 1995, $16
Available from: Human Kinetics Publishers; phone: (800)747-4457; fax: (217)351-1549; web site: http://www.humankinetics.com

Guidelines for the Development of Fitness, Physical Activity, Recreation, and Sport Facilities, Sawyer TH, LaRue R, Seidler T & Goldfine B, 1999, $27
Available from: American Association for Active Lifestyles and Fitness; phone: (800)321-0789; fax: (301)567-9553

Guidelines for School Intramural Programs, National Association for Sport and Physical Education, 1995, no cost (position paper)
Available from: National Association for Sport and Physical Education, (800)213-7193, ext. 410; (703)476-8316

Physical Education, Seefeldt VD, chapter in *Health is Academic: A Guide to Coordinated School Health Programs*, Marx E & Wooley SF (Eds.) with Northrop D, 1998, $24.95
Available from: Teachers College Press; phone: (800)575-6566; fax: (802)864-7626; e-mail: tcp.orders@aidcvt.com; web site: http://tc-press.tc.columbia.edu/order2.html

Substitution for Instructional Physical Education Programs, National Association for Sport and Physical Education, 1995, no cost (position paper)
Available from: National Association for Sport and Physical Education, (800)213-7193, ext. 410; (703)476-8316

A Teacher's Guide to Including Students with Disabilities in Regular Physical Education, Block ME, 1994, $39
Available from: Paul H. Brookes Publishing Company, Baltimore, MD; phone: (800)638-3775; fax: (410)337-8539

Title IX Tool Box, Carpenter L & Acosta V (Eds.), Volume I, 1991, and Volume II, 1997, $62
Available from: National Association for Girls and Women in Sports; phone: (800)321-0789; fax: (301)567-9553

Organizations

American Heart Association (AHA)
National Office
7272 Greenville Avenue
Dallas, TX 75231-4596
(800)242-8721
http://www.americanheart.org

National Association for Sport and Physical Education (NASPE)
1900 Association Drive
Reston, VA 20191-1599
(800)213-7193, ext.410
(703)476-8316 (fax)
naspe@aahperd.org
http://www.aahperd.org/naspe/naspe.html

National Federation of State High School Associations (NFHS)
11724 NW Plaza Circle
PO Box 20626
Kansas City, MO 64195-0626
(816)464-5400
(816)464-5571 (fax)
http://www.nfhs.org

National Heart, Lung, and Blood Institute (NHLBI)
NHBLI Information Center
PO Box 30105
Bethesda, MD 20824-0105
(301)251-1222
(301)251-1223 (fax)
nhlbiic@dgsys.com
http://www.nhlbi.nih.gov

National Program for Playground Safety
School of HPELS
University of Northern Iowa
Cedar Falls, IA 50614-0618
(800)554-PLAY (7529)
(319)273-5833 (fax)
http://www.uni.edu/playground

President's Council on Physical Fitness and Sports (PCPFS)
200 Independence Avenue, SW, Room 738H
Washington, DC 20201-0004
(202)690-9000
(202)690-5211 (fax)

Society of State Directors of Health, Physical Education
and Recreation (SSDHPER)
1900 Association Drive
Reston, VA 20191-1599
(800)213-7193, ext. 402 or (703)476-3402
(703)476-9527 (fax)
http://www.thesociety.org

Resources for Module 4: Nutrition Services

Materials

Accommodating Children with Special DietaryNeeds in the School Nutrition Programs: Guidance for School Food Service Staff, U.S. Department of Agriculture/Food and Consumer Service, 1995, no cost
Available from: U.S. Department of Agriculture/Food and Nutrition Information Center; phone: (301)504-5719; fax: (301)504-6409; web site: http://www.nal.usda.gov/fnic/

CARE: Special Nutrition for Kids, Alabama Department of Education/revised by U.S. Department if Agriculture, 1995, $19
Available from: National Food Service Management Institute; phone: (800)321-3054; fax: (800)321-3061

Competencies, Knowledge and Skills Required of Effective School Nutrition Managers, Conklin M (Ed.), 1995, $15
Available from: National Food Service Management Institute; phone: (800)321-3054; fax: (800)321-3061

Eat to Learn, Learn to Eat: The Link Between Nutrition and Learning in Children, National Health/Education Consortium, 1993, $10
Available from: Institute for Educational Leadership; phone: (202)822-8405; fax: (202)872-4050

Healthy Eating Helps You Make the Grade!, U.S. Department of Agriculture/Team Nutrition, 1999, no cost
Available from: U.S. Department of Agriculture/Team Nutrition; 3101 Park Center Drive, Room 1010, Alexandria, VA 22302; phone: (703)305-1624; fax: (703)305-2879; e-mail: teamnutrition@fns.usda.gov

Healthy EDGE 2000 (Implementing the Dietary Guidelines for Americans in Schools), School Food Service Foundation, 1998, Participant Manual, $25; Trainer Guide, $20; Disk Presentation, $7.50
Available from: American School Food Service Association Emporium; phone: (800)728-0728
For information on the School Food Service Foundation's 10-hour Healthy EDGE 2000 workshop, call (800)877-8822, ext. 130

Healthy School Meals - Healthy Kids: A Leadership Guide for School Decision-Makers, U.S. Department of Agriculture/Team Nutrition, 1997, no cost
Available from: U.S. Department of Agriculture/Team Nutrition; 3101 Park Center Drive, Room 1010, Alexandria, VA 22302; phone: (703)305-1624; fax: (703)305-2879; e-mail: teamnutrition@fns.usda.gov

Keys to Excellence: Standards of Practice for Nutrition Integrity, American School Food Service Association, 1995, $19.55
Available from: American School Food Service Association Emporium; phone: (800)728-0728

Keys to Excellence Support Materials, Hopkins C, 1996, $5.50
Available from: National Food Service Management Institute; phone: (800)321-3054; fax: (800)321-3061

Let's Party: Healthy Parties for School and Home, West Virginia Department of Education, 1994, $6.75
Available from: West Virginia Curriculum Technology Resource Center; phone: (304)372-7874; fax: (304)372-7875

Report on Indicators and Evidence of Achievement for Nutrition Integrity Standards, Sneed J, 1994, $20
Available from: National Food Service Management Institute; phone: (800)321-3054; fax: (800)321-3061

School Nutrition Services, Caldwell D, Nestle M, & Rogers W, chapter in *Health is Academic: A Guide to Coordinated School Health Programs*, Marx E & Wooley SF (Eds.) with Northrop D, 1998, $24.95
Available from: Teachers College Press; phone: (800)575-6566; fax: (802)864-7626; e-mail: tcp.orders@aidcvt.com; web site: http://tc-press.tc.columbia.edu/order2.html

Strategies for Success: A Resource Manual for SHAPE California Child Nutrition Programs, California Department of Education/Nutrition Education and Training Program, 1995, $15
Available from: California Department of Education; phone: (800)995-4099]; fax: (916)323-0823

Time for School Breakfast: Healthy Eating Helps You Make the Grade!, 1998, no cost
U.S. Department of Agriculture/Team Nutrition
Available from: U.S. Department of Agriculture/Team Nutrition; 3101 Park Center Drive, Room 1010, Alexandria, VA 22302; phone: (703)305-1624; fax: (703)305-2879; e-mail: teamnutrition@fns.usda.gov

Team Nutrition School Activity Planner: A How-To Guide for Team Nutrition Schools and Supporters, U.S. Department of Agriculture/Team Nutrition, 1997, no cost
Available from: U.S. Department of Agriculture/Team Nutrition; 3101 Park Center Drive, Room 1010, Alexandria, VA 22302; phone: (703)305-1624; fax: (703)305-2879; e-mail: teamnutrition@fns.usda.gov

A Tool Kit for Healthy School Meals: Recipes and Training Materials: USDA's New School Lunch and Breakfast Recipes, U.S. Department of Agriculture/Team Nutrition, 1997, $25
Available from: National Food Service Management Institute; phone: (800)321-3054; fax: (800)321-3061

Training Guidelines for Healthy School Meals, U.S. Department of Agriculture/Team Nutrition, 1996, no cost
Available from: U.S. Department of Agriculture/Team Nutrition; 3101 Park Center Drive, Room 1010, Alexandria, VA 22302; phone: (703)305-1624; fax: (703)305-2879; e-mail: teamnutrition@fns.usda.gov

USDA's Great Nutrition Adventure Packet, U.S. Department of Agriculture/Team Nutrition, 1996, no cost
Available to schools that enroll as Team Nutrition schools.
Available from: U.S. Department of Agriculture/Team Nutrition; 3101 Park Center Drive, Room 1010, Alexandria, VA 22302; phone: (703)305-1624; fax: (703)305-2879; e-mail: teamnutrition@fns.usda.gov

Using the Food Guide Pyramid: A Resource for Nutrition Educators, U.S. Department of Agriculture/Center for Nutrition Policy and Promotion, 1996, no cost
Available from: U.S. Department of Agriculture/Center for Nutrition Policy and Promotion; web site: http://www.usda.gov/cnpp

Organizations

American Cancer Society (ACS)
National Office
1599 Clifton Road, NE
Atlanta, GA 30329
(800)227-2345
http://www.cancer.org

American Dietetic Association (ADA)
National Center for Nutrition and Dietetics
216 West Jackson Blvd.
Chicago, IL 60606-6995
(800)366-1655 (Consumer Nutrition Hotline)
(312)899-4739 (fax)
hotline@eatright.org
http://www.eatright.org

American Heart Association (AHA)
National Office
7272 Greenville Avenue
Dallas, TX 75231-4596
(800)242-8721
http://www.americanheart.org

American School Food Service Association (ASFSA)
1600 Duke St., 7th Floor
Alexandria, VA 22314
(800)877-8822
(703)739-3915 (fax)
asfsa@asfsa.org
http://www.asfsa.org

Food Allergy Network
10400 Eaton Place, Suite 107
Fairfax, VA 22030-2208
(800)929-4040
(703)691-2713 (fax)
fan@worldweb.net
http://www.foodallergy.org

Food and Nutrition Information Center (FNIC)
Agricultural Research Service, USDA
National Agricultural Library, Room 304
10301 Baltimore Avenue
Beltsville, MD 20705-2351
(301)504-5719
(301)504-6409 (fax)
TTY: (301)504-6856
e-mail: fnic@nal.usda.gov
http://www.nal.usda.gov/fnic/

National 5 A Day Program
National Cancer Institute
6130 Executive Boulevard EPN 232
Bethesda, MD 20892-7332
(301)496-8520
(301)496-6637 (fax)
http://dccps.nci.nih.gov/5aday

National Food Service Management Institute (NFSMI)
The University of Mississippi
PO Drawer 188
University, MS 38677-0188
(800)321-3054
(800)321-3061 (fax)
nfsmi@sunsetbackbone.olemiss.edu
http://www.olemiss.edu/depts/nfsmi

Society for Nutrition Education (SNE)
7101 Wisconsin Avenue, Suite 901
Bethesda, MD 20814
(800)235-6690 or (301)656-4938
(301)656-4958 (fax)
info@sne.org
http://www.sne.org

U.S. Department of Agriculture/Team Nutrition
3101 Park Center Drive, Room 1010
Alexandria, VA 22302
(703)305-1624
(703)305-2879 (fax)
teamnutrition@fns.usda.gov
http://www.fns.usda.gov/tn/

Your state's Nutrition, Education, and Training (NET) Program Coordinator is located in either the state department of education or state department of health.

Your state's Director for Child Nutrition Programs is located in either the state department of education, state department of health, or state department of agriculture.

The contacts for these positions in your state are listed on the U.S. Department of Agriculture/Team Nutrition web site at http://www.fns.usda.gov/tn/

Resources for Module 5: School Health Services

Materials

Assessing Physical Activity and Fitness in the Office Setting, American Academy of Pediatrics/Committee on Sports Medicine, *Pediatrics*, 93(4):686-689, 1994

Bright Futures in Practice: Physical Activity, 1999, cost to be determined
Available from: National Maternal and Child Health Clearinghouse, 2070 Chain Bridge Road, Suite 450, Vienna, VA 22182-2536; phone: (703)356-1964; fax: (703)821-2098; e-mail: nmchc@cirsol.com

Bringing WIC to School, Steinschneider J & Coyne AH, 1995, $8
Available from: Center on Budget and Policy Priorities; phone: (202)408-1080; fax: (202)408-1056; web site: http://www.cbpp.org/pubs/library.htm

Guidelines for Adolescent Preventive Services: Recommendations and Rationale, American Medical Association, 1995, $29 (book), no cost for one summary monograph
Available from: American Medical Association; for book, phone: (800)621-8335; for one summary monograph, phone: (312)464-5570

Nutrition Priorities in Student Health Services in *Principles and Practices of Student Health, Volume One: Foundations*, Wallace HM, Patrick K, Parcel GS & Igoe JB (Eds.), 1992, $19.95
Available from: Third Party Publishing Company, Oakland, CA; phone: (510)339-2323; fax: (510)339-6729

Promotion of Physical Activity Among Adolescents by Primary Health Care Providers, DuRant RH & Hergengroeder AC, *Pediatric Exercise Science*, 6(4):448-463, 1994

School Health: Policy and Practice (5th ed.), American Academy of Pediatrics/Committee on School Health & Nader PR (Ed.), 1993, $44.95
Available from: American Academy of Pediatrics; phone: (800)433-9016; fax: (847)228-1281; web site: http://www.aap.org/pubserv/pubhome.htm

School Health Services, Duncan P & Igoe JB, a chapter in *Health is Academic: A Guide to Coordinated School Health Programs*, Marx E & Wooley SF (Eds.) with Northrop D, 1998, $24.95
Available from: Teachers College Press; phone: (800)575-6566; fax: (802)864-7626; e-mail: tcp.orders@aidcvt.com; web site: http://tc-press.tc.columbia.edu/order2.html

Standards of Professional School Nursing Practice, $15
Available from: National Association of School Nurses, Inc.; phone: (207)883-2117; fax: (207)883-2683

Organizations

American Academy of Pediatrics (AAP)
141 Northwest Point Blvd.
Elk Grove Village, IL 60007
(800)433-9016
(847)228-5097 (fax)
http://www.aap.org

American Medical Association (AMA)
Child and Adolescent Program
515 N. State Street
Chicago, IL 60610
(312)464-5570
(312)464-5842 (fax)
gaps@ama-assn.org
http://www.ama-assn.org/adolhlth.adolhlth

American Nurses Association (ANA)
600 Maryland Avenue, SW, Suite 100, West
Washington, DC 20024
(800)274-4262
(202)651-7001 (fax)
http://www.nursingworld.org

American School Health Association (ASHA)
7263 State Route 43
PO Box 708
Kent, OH 44240
(330)678-1601
(330)678-4526 (fax)
http://www.ashaweb.org

Assoc. of Maternal and Child Health Programs
1350 Connecticut Avenue, NW, Suite 803
Washington, DC 20036
(202)775-0436
(202)775-0061 (fax)
http://www.amchp1.org

National Assembly on School-Based Health Care (NASBHC)
1522 K Street, NW, Suite 600
Washington, DC 20005
(888)286-8727
(202)289-0776 (fax)
info@mail.nasbhc.org
http://www.nasbhc.org

National Association of School Nurses (NASN)
PO Box 1300
Scarborough, ME 04070
(207)883-2117
(207)883-2683 (fax)
nasn@aol.com
http://www.nasn.org

National Center for Education in Maternal and Child Health
2000 15th Street North, Suite 701
Arlington, VA 22201-2617
(703)524-7802
(703)524-9335 (fax)
brightfutures@ncemch.org
http://www.ncemch.org/
http://www.brightfutures.org

Resources for Module 6: School Counseling, Psychological, and Social Services

Materials

Building the Capacity of Schools to Improve the Health of the Nation: A Call for Assistance from Psychologists, Kolbe LJ, Collins J & Cortese P, *American Psychologist*, 52(3):256-265, 1997

Health Counseling, Balbu MB, Petter MP, Saleh KP & Litwack L, 1992, $14.60
Available from: American School Health Association; phone: (330)678-1601; fax: (330)678-4526; web site: http://www.ashaweb.org/pubs/

The National Standards for School Counseling, Campbell CA & Dahir CA, 1998, $19.95
Available from: American School Counselor Association; phone: (800)401-2404; fax: (703)661-1501

School Counseling, Psychological, and Social Services, Adelman H, chapter in *Health is Academic: A Guide to Coordinated School Health Programs*, Marx E &Wooley SF (Eds.) with Northrop D, 1998, $24.95
Available from: Teachers College Press; phone: (800)575-6566; fax: (802)864-7626; e-mail: tcp.orders@aidcvt.com; web site: http://tc-press.tc.columbia.edu/order2.html

Organizations

American Counseling Association (ACA)
5999 Stevenson Avenue
Alexandria, VA 22304-3300
(800)347-6647
(703)823-0252 (fax)
http://www.counseling.org

American Psychological Association
750 First Street, NE
Washington, DC 20002-4242
(202)336-5500
(202)336-5962 (fax)
http://www.apa.org

American School Counselor Association (ASCA)
801 N. Fairfax St., Suite 310
Alexandria, VA 22314
(800)306-4722
(703)683-1619 (fax)
asca@erols.com
http://www.schoolcounselor.org

American School Health Association (ASHA)
7263 State Route 43
PO Box 708
Kent, OH 44240
(330)678-1601
(330)678-4526 (fax)
http://www.ashaweb.org

National Association of School Psychologists (NASP)
4340 East West Highway, Suite 402
Bethesda, MD 20814
(312)657-0270
(312)657-0275 (fax)
nasp8455@aol.com
http://www.naspweb.org

Resources for Module 7: Health Promotion for Staff

Materials

School-Site Health Promotion for Staff, Allegrante JP, chapter in *Health is Academic: A Guide to Coordinated School Health Programs*, Marx E & Wooley SF (Eds.) with Northrop D, 1998, $24.95
Available from: Teachers College Press; phone: (800) 575-6566; fax: (802) 864-7626; e-mail: tcp.orders@aidcvt.com; web site: http://tc-press.tc.columbia.edu/order2.html

Worksite Nutrition: A Guide to Planning, Implementation, and Evaluation (2nd ed.), American Dietetic Association and U.S. Department of Health and Human Services/Office of Disease Prevention and Health Promotion, 1993, $12
Available from: American Dietetic Association; phone: (312)899-0040; fax: (312)899-4899; web site: http://www.eatright.org/catalog

Organizations

Association for Worksite Health Promotion (AWHP)
60 Revere Drive, Suite 500
Northbrook, IL 60062
(847)480-9574
(847)480-9282 (fax)
awhp@awhp.org
http://www.awhp.org

Employee Assistance Professionals Association (EAPA)
2101 Wilson Boulevard, Suite 500
Arlington, VA 22201
(703)522-6272
(703)522-4585 (fax)
eapamain@aol.com
http://www.eap-association.com

National Association for Sport and Physical Education (NASPE)
1900 Association Drive
Reston, VA 20191-1599
(800)213-7193, ext.410
(703)476-8316 (fax)
naspe@aahperd.org
http://www.aahperd.org/naspe/htm

Resources for Module 8: Family and Community Involvement

Materials

Active Youth: Ideas for Implementing CDC Physical Activity Promotion Guidelines, Samman P, 1998, $12
Available from: Human Kinetics Publishers; phone: (800)747-4457; fax: (217)351-1549; web site: http://www.humankinetics.com

Community Agency and School Collaboration to Enhance Health Education: Putting Together the Pieces, Brothen K & Anderson BJ, 1997, no cost
Available from: Minnesota Department of Children, Families and Learning; phone: (651)582-8430

Community Nutrition Action Kit: For People Where They Live, Learn and Play, U.S. Department of Agriculture/Team Nutrition, 1996, $50, no cost to download from web site
Available from: National Food Service Management Institute; phone: (800)321-3054; fax: (800)321-3061; web site: http://schoolmeals.nal.usda.gov:8001/Training/cnahome.html

Family and Community Involvement in School Health, Carlyon P, Carlyon W & McCarthy AR, chapter in *Health is Academic: A Guide to Coordinated School Health Programs*, Marx E & Wooley SF (Eds.) with Northrop D, 1998, $24.95
Available from: Teachers College Press; phone: (800) 575-6566; fax: (802) 864-7626; e-mail: tcp.orders@aidcvt.com; web site: http://tc-press.tc.columbia.edu/order2.html

Food, Family & Fun: A Seasonal Guide to Healthy Eating: Commemorating 50 Years of School Lunch, U.S. Department of Agriculture/Team Nutrition, 1998, $4.25
Available from: National Food Service Management Institute; phone: (800)321-3054; fax: (800)321-3061

Generation Fit: Nutrition and Physical Activity Action Packet, American Cancer Society, 1999, price determined by local ACS affiliates
Available from: your local ACS affiliate; look in your local phone book or call (800)ACS-2345

Is Your Child Being Physically Educated?, National Association for Sport and Physical Education, no cost (position paper)
Available from: National Association for Sport and Physical Education; phone: (800)213-7193, ext. 410

A Model for Parental Involvement in Physical Education, Virgilio SJ, *Journal of Physical Education, Recreation and Dance*, 61(8):66-70, 1990

National Standards for Parent/Family Involvement Programs, The National PTA, 1998, $5
Available from: The National PTA; phone: (312)670-6782; fax: (312)670-6783

Parents...Are Your Children Fit to Achieve?, National Association for Sport and Physical Education, no cost (position paper)
Available from: National Association for Sport and Physical Education; phone: (800)213-7193, ext. 410

Parent/Guardian's Checklist for Quality Sport and Physical Activity Programs for Children and Youth, National Association for Sport and Physical Education, no cost (position paper)
Available from: National Association for Sport and Physical Education; phone: (800)213-7193, ext. 410

Promoting Physical Activity: A Guide for Community Action, U.S. Department of Health and Human Services/Centers for Disease Control and Prevention, 1999, $32
Available from: Human Kinetics Publishers; phone: (800)747-4457; fax: (217)351-1549; web site: http://www.humankinetics.com

Public Recreation in High Risk Environments: Programs That Work, 1996, $25
Available from: National Recreation and Park Association; phone: (703)858-2190; fax: (703)858-0794

Step by Step to Involving Parents in Health Education, Birch DA, 1996, $24.95
Available from: ETR Associates; phone: (800)321-4407; fax: (800)435-8433; web site: http://www.etr.org

Team Up at Home: Team Nutrition Activity Booklet, Fun Nutrition Activities for the Family, U.S. Department of Agriculture/Team Nutrition, 1996, no cost
Available from: U.S. Department of Agriculture/Team Nutrition; 3101 Park Center Drive, Room 1010, Alexandria, VA 22302; phone: (703)305-1624; fax: (703)305-2879; e-mail: teamnutrition@fns.usda.gov

Your Child's Fitness: Practical Advice for Parents, Kalish S, 1996, $14.95
Available from: Human Kinetics Publishers; phone: (800)747-4457; fax: (217)351-1549; web site: http://www.humankinetics.com

Organizations

National Association for Sport and Physical Education (NASPE)
1900 Association Drive
Reston, VA 20191-1599
(800)213-7193, ext.410 or (703)476-3410
(703)476-8316 (fax)
naspe@aahperd.org
http://www.aahperd.org/naspe/naspe.html

National Coalition for Parent Involvement in Education (NCPIE)
1201 16th Street, NW, Box 39
Washington, DC 20036
(202)822-0405
(202)872-4050 (fax)
http://www.ncpie.org

The National PTA
330 North Wabash Avenue, Suite 2100
Chicago, IL 60611-3690
(312)670-6782
(312)670-6783 (fax)
info@pta.org
http://www.pta.org

National Recreation and Park Association (NRPA)
22377 Belmont Ridge Road
Ashburn, VA 20148
(703)858-0784
(703)858-0794 (fax)
info@nrpa.org
http://www.nrpa.org

U.S. Department of Agriculture/Team Nutrition
3101 Park Center Drive, Room 1010
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